

TSD File Inventory Index

Date: March 2, 2000

Initial: CMH/General

Facility Name: <u>Union Camp Corporation / Certain Division - The Aldrich Co.</u>		
Facility Identification Number: <u>OHIO 004 166 336</u>		
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Note: Transmittal Letter to Be Included with Reports.

Comments: *Documents do not justify individual folders per schedule.*

**Public
Participation**

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION V

DATE: October 5, 1982

SUBJECT: Union Camp Corp./ Closure Plan
OHD004166336

FROM: Barbara Russell
RAIU

TO: Elizabeth Utley
STU #2

This memorandum is to inform you that the public comment period pertaining to Union Camp Corp. ended on October 4, 1982. No public comments were received in regard to the closure of Union Camp Corp. plant in Solon, Ohio.

cc: Part A File
State Log

file signed out

SHW-TUB

AUG 26 1982

Mr. F.A. Manfredonia
Manufacturing Manager
Union Camp Corporation
6225 Camp Industrial Road
Solon, Ohio 44139

RE: OHD044166336
Union Camp Corporation
Solon, Ohio

Dear Mr. Manfredonia:

This office has received the closure plan for your drum storage area.

Before this Agency can issue final approval, we are required to issue public notice of closure and to consider any comments on the manner in which closure will be completed. Public Notice should appear in the Times Register of Bedford, Ohio approximately September 2, 1982, the date of the notice will commence a 30-day comment period.

A draft copy of the public notice is attached for your information. Please note that in order to facilitate public understanding, we are proposing that a copy of the closure plan be available at the Solon Public Library during regularly scheduled business hours.

Please call me at (312) 886-6162, if you have any questions.

Sincerely,

Elizabeth H. Utley
Environmental Scientist

cc: Tom Carlisle, OEPA w/plan

bcc: Tom Golz
Part A File

SHW-TUB:LIZ UTLEY:PG:8-25-82

INITIALS	DATE	TYPIST <i>pb</i> 8/25	AUTHOR <i>gms</i> 8/25	PEU CHIEF	STU #2 CHIEF <i>KRS</i> 8/26	TBS CHIEF	WMB CHIEF	AHMD DIRECTOR
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BEDFORD TIMES-REGISTER

459 Broadway
Bedford, O. 44146



MAPLE HEIGHTS PRESS

459 Broadway
Bedford, O. 44146

9/2/82

U.S. EPA Region V
RCRA Activities
PO Box A3587
Chicago IL 60690

In Account with office indicated below — Thank You.

Legal Notice: Closure Plan from Union Camp Corp.

Invoice No: 2775

Published 9/2/82

7" A \$3.20 one week

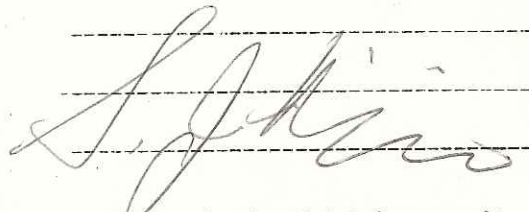
\$22.40

0H0004166 336

THE STATE OF OHIO } ss.
CUYAHOGA COUNTY }

Samuel J. Niver being
duly sworn says that he is general
manager for the
publishers of the BEDFORD TIMES-RE-
GISTER, a weekly newspaper published in
said County of Cuyahoga and having a
general circulation therein: and that the
annexed advertisement was published in
said newspaper on the following day or
days.

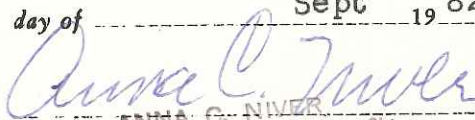
9/2/82



Sworn to and subscribed before me this

2nd

day of Sept 19 82



ANNA C. NIVER
Notary Public, State of Ohio
My Commission Expires April 2, 1985

PUBLIC NOTICE

The U.S. Environmental Protection Agency (USEPA) has received a closure plan from Union Camp Corp. for a hazardous waste storage area in its plant located at 6225 Camp Industrial Road, Solon, Ohio. The plan, submitted on Aug. 2, 1982, proposed the removal of a maximum of 15 55-gallon drums of ink wastes for disposal in an approved off-site facility. According to the plan, the use of inks which result in hazardous wastes will be discontinued by Union Camp Corp. No hazardous wastes will remain on site after closure.

The Union Camp Corp. plan was submitted to satisfy regulations promulgated under the Resource Conservation and Recovery Act. These were published under 40 CFR 265 Subpart G, which appeared in the Federal Register Jan. 12, 1981. The plan will be evaluated by USEPA according to the criteria of the regulations.

The plan and related background materials are available to the public at USEPA Waste Management Division, 111 W. Jackson, Chicago, Illinois (312) 886-3713, from 8:30 a.m. to 4:30 p.m. Monday through Friday. These materials also may be seen at the Solon Public Library, 33800 Inwood Road, Solon, Ohio, during business hours.

Public comments concerning this application are requested by USEPA and will be accepted through Oct. 4, 1982. Please send comments to:

U.S. Environmental Protection
Agency
Region V
RCRA Activities
P.O. Box A3587
Chicago, Illinois 60690

BTR9/2/82;Inv.2775

Printers Fee \$ 22.40

Affidavit

Total \$ 22.40

Received Payment

PUBLIC NOTICE

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The Union Camp Corp. plan was submitted to satisfy regulations promulgated under the Resource Conservation and Recovery Act. These were published under 40 CFR 265 Subpart G, which appeared in the Federal Register Jan. 12, 1981. The plan will be evaluated by USEPA according to the criteria of the regulations.

The plan and related background materials are available to the public at USEPA Waste Management Division, 111 W. Jackson, Chicago, Illinois (312) 886-3713, from 8:30 a.m. to 4:30 p.m. Monday through Friday. These materials also may be seen at the Solon Public Library, 33800 Inwood Road, Solon, Ohio, during business hours.

Public comments concerning this application are requested by USEPA and will be accepted through Oct. 4, 1982. Please send comments to:

U.S. Environmental Protection Agency
Region V
RCRA Activities
P.O. Box A3587
Chicago, Illinois 60690



RECEIVED

JUN 26 1986

OWD - AIS
U.S. EPA, REGION V

CONTAINER DIVISION 6225 CAMP INDUSTRIAL RD., SOLON, OHIO 44139 TELEPHONE (216) 248-0125

February 14, 1986

RECEIVED

JUN 26 1986

OWD - AIS
U.S. EPA, REGION V

Mr. David A. Stringham
Chief, Solid Waste Branch
Environmental Protection Agency
RCRA Activities Region V
P.O. Box A-3587
Chicago, Illinois 60690

RE: EPA ID# OHD004166336

G PA

Dear Mr. Stringham:

Attached is the completed "Waste Minimization Addendum" for 1985 for the Union Camp Solon, Ohio facility as requested. In addition to completing the attached information sheet, we offer the following comments: Union Camp Corporation - Solon, Ohio has not generated, treated, stored or disposed of any hazardous waste since July 9, 1982. Browning Ferris Industries removed, transported, and disposed of 15 drums of waste at that time. Enclosed are copies of State of Michigan Manifest No. M10229702 showing disposal; our 1982 request for withdrawal of our Hazardous Waste Permit Application; our Closure Statement and Ohio and Region V EPA notification of our facility's removal from regulation under RCRA. This information should help clarify the situation.

We would appreciate your assistance and a formal reply from EPA Region V to this aforementioned status change, specifically addressing the paperwork requirements. Should you require additional information or clarification please advise.

Thank you for your consideration in this matter.

Sincerely,

A handwritten signature in blue ink, appearing to read "F. A. Manfredonia".

F. A. Manfredonia
Manufacturing Manager

FAM:mp1

c: State of Ohio Environmental Protection Agency
Mr. Thomas E. Crepeau, Manager
Data Management Section
Division of Solid and Hazardous Waste Management
361 E. Broad Street
Columbus, Ohio 43216-1049

WASTE MINIMIZATION ADDENDUM TO GENERATOR BIENNIAL OR
ANNUAL HAZARDOUS WASTE REPORT FOR 1985

THIS REPORT IS FOR THE CALENDAR YEAR ENDING DECEMBER 31, 1985.

The Hazardous and Solid Waste Amendments of 1984 require all generators of hazardous waste to submit the following information to the United States Environmental Protection Agency or a State authorized to collect such information:

GENERATOR'S EPA I.D. No. 10 H D 10 14 1 6 6 3 3 6 1

GENERATOR NAME: Union Camp Corporation

GENERATOR ADDRESS: 6225 Camp Industrial Road

Solon, Ohio 44139

WASTE MINIMIZATION

Describe in the space below your efforts, undertaken during calendar year 1985, to reduce the volume and toxicity of the hazardous waste which your business generates. Also describe changes in waste volume and toxicity actually achieved during 1985 in comparison to previous years, to the extent possible.

This facility does not engage in hazardous waste activity. Please refer to attached letter.

CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

F. A. Manfredonia
PRINT/TYPE NAME

Manufacturing
Manager
TITLE

F. A. Manfredonia
SIGNATURE

2-27-86
DATE SIGNED



UNITED STATES
ENVIRONMENTAL PROTECTION AGENCY
REGION V

111 West Jackson Blvd.
CHICAGO, ILLINOIS 60604

REPLY TO ATTENTION OF:

RCRA ACTIVITIES

MAY 14 1982

Mr. James Scazzaro
Union Camp Corporation
6225 Industrial Road
Solon, Ohio 44139

RE: Interim Status Acknowledgement
FACILITY NAME: Union Camp Corporation

USEPA ID No. OHD004166336

Dear Mr. Scazzaro:

This is to acknowledge that the U.S. Environmental Protection Agency (USEPA) has completed processing your Part A Hazardous Waste Permit Application. It is the opinion of this office that the information submitted is complete and that you, as an owner or operator of a hazardous waste management facility, have met the requirements of Section 3005(e) of the Resource Conservation and Recovery Act (RCRA) for Interim Status. However, should USEPA obtain information which indicates that your application was incomplete or inaccurate, you may be requested to provide further documentation of your claim for Interim Status. Our opinion will be reevaluated on the basis of this information.

As an owner or operator of a hazardous waste management facility, you are required to comply with the interim status standards as prescribed in 40 CFR Parts 122 and 265, or with State rules and regulations in those States which have been authorized under Section 3006 of RCRA. In addition, you are reminded that operating under interim status does not relieve you from the need to comply with all applicable State and local requirements.

The printout enclosed with this letter identifies the limit(s) of the process design capacities your facility may use during the interim status period. This information was obtained from your Part A Permit application. If you wish to handle new wastes, to change processes, to increase the design capacity of existing processes, or to change ownership or operational control of the facility, you may do so only as provided in 40 CFR Sections 122.22 and 122.23.

As stated in the first paragraph of this letter, you have met the requirements of 40 CFR Part 122.23; your facility may operate under interim status until such time as a permit is issued or denied. This will be preceded by a request from this office or the State (if authorized) for Part B of your application. Please contact Arthur Kawatachi of my staff at (312) 886-7449, if you have any questions concerning this letter or the enclosure.

Sincerely yours,


Karl J. Klepitsch, Jr., Chief
Waste Management Branch

Enclosure
cc: J.H. Neale

28/5/9/82

FACILITY NAME

UNION CAMP CORPORATION

EPA ID NUMBER

OHD004166335

FACILITY OPERATOR

UNION CAMP CORPORATION

FACILITY OWNER

UNION CAMP CORPORATION

FACILITY LOCATION

6225 CAMP INDUSTRIAL ROAD

SOLOM

OH 44139

PROCESS CODE

S01

DESIGN CAPACITY

100000.00000

UNIT OF MEASURE

G

*****KEY*****				
PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE	* UNIT OF MEASURE	CODE

STORAGE:			* GALLONS	G
*****			* LITERS	L
CONTAINER	S01	G OR L	* CUBIC YARDS	Y
TANK	S02	G OR L	* CUBIC METERS	C
WASTE PILE	S03	Y OR C	* GALLONS PER DAY	U
SURFACE IMPOUNDMENT	S04	G OR L	* LITERS PER DAY	V
DISPOSAL:			* TONS PER HOUR	D
*****			* METRIC TONS\HOUR	W
INJECTION WELL	D79	G,L,U, OR V	* GALLONS\HOUR	E
LANDFILL	D80	A OR F	* LITERS\HOUR	H
LAND APPLICATION	D81	B OR Q	* ACRE-FEET	A
OCEAN DISPOSAL	D82	U OR V	* HECTARE-METER	F
SURFACE IMPOUNDMENT	D83	G OR L	* ACRES	B
TREATMENT:			* HECTARES	Q
*****			* POUNDS\HOUR	J
TANK	T01	U OR V	* KILOGRAMS\HOUR	R
SURFACE IMPOUNDMENT	T02	U OR V	* TONS PER DAY	N
INCINERATOR	T03	D,W,E, OR H	* METRIC TONS\DAY	S
OTHER	T04	J,R,W,S,U,V	*	



ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

• OHD004166336

REACKNOWLEDGEMENT

UNION CAMP CORPORATION
6225 CAMP INDUSTRIAL ROAD
SOLON

OH 44139

INSTALLATION ADDRESS

6225 CAMP INDUSTRIAL ROAD
SOLON

OH 44139



U.S. ENVIRONMENTAL PROTECTION AGENCY

NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTALLATION'S EPA I.D. NO.

NAME OF INSTALLATION

II. INSTALLATION MAILING ADDRESS

III. LOCATION OF INSTALLATION

PLEASE PLACE STAMP HERE

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

FOR OFFICIAL USE ONLY

COMMENTS

INSTALLATION'S EPA I.D. NUMBER

APPROVED

DATE RECEIVED (yr., mo., & day)

F 04 D 00 4 1 6 6 3 3 6 T/A C 1 A 8 0 0 8 1 8

I. NAME OF INSTALLATION

UNION CAMP CORPORATION

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

3 6 2 2 5 CAMP INDUSTRIAL ROAD

CITY OR TOWN

ST.

ZIP CODE

4 S O L O N

O H 4 4 1 3 9

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

5 6 2 2 5 CAMP INDUSTRIAL ROAD

CITY OR TOWN

ST.

ZIP CODE

6 S O L O N

O H 4 4 0 6 7

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

PHONE NO. (area code & no.)

2 S C A Z Z A R O J A M E S G E N E R A L M A N A G E R 2 1 6 - 2 4 8 - 0 1 2 5

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

8 U N I O N C A M P C O R P O R A T I O N

B. TYPE OF OWNERSHIP (enter the appropriate letter into box)

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

F = FEDERAL
M = NON-FEDERAL

M

☒ A. GENERATION☐ B. TRANSPORTATION (complete item VII)☒ C. TREAT/STORE/DISPOSE☐ D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

☐ A. AIR☐ B. RAIL☐ C. HIGHWAY☐ D. WATER☐ E. OTHER (specify):

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

C. INSTALLATION'S EPA I.D. NO.

☒ A. FIRST NOTIFICATION☐ B. SUBSEQUENT NOTIFICATION (complete item C)

0 4 D 0 0 4 1 6 6 3 3 6

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

AUG 15 1980

S	0	4	0	0	4	1	6	6	3	3	6	T/A	C
W	1	2										13	14
												15	

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
7	8	9	10	11	12
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
19	20	21	22	23	24
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
25	26	27	28	29	30
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
37	38	39	40	41	42
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
43	44	45	46	47	48
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☐ 1. IGNITABLE
(D001)

☐ 2. CORROSIVE
(D002)

☐ 3. REACTIVE
(D003)

☒ 4. TOXIC
(D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE

NAME & OFFICIAL TITLE (type or print)

DATE SIGNED

James J. Scazzaro
General Manager

7/28/80



UNITED STATES
ENVIRONMENTAL PROTECTION AGENCY

REGION 5

RCRA ACTIVITIES

P.O. BOX A3587

JUL 1 1986 CHICAGO, ILLINOIS 60690

Mr. F.A. Manfredonia
Manufacturing Manager
Union Camp Corporation
Container Division
6225 Camp Industrial Road
Solon, Ohio 44139

RE: Withdrawal of Part A (Non-Hazardous Waste)
FACILITY NAME: Union Camp Container Division
U.S. EPA ID NO.: OHD 004166336

Dear Mr. Manfredonia:

This is to acknowledge that we have completed our review of your Part A Hazardous Permit Application and your letter of February 14, 1986 requesting withdrawal of your Application. According to the information you have submitted, the wastes which are treated, stored or disposed at your facility are not defined as hazardous in 40 CFR 261.3. It is the opinion of this office, based on the information submitted, that your facility is not required to have a Hazardous Waste Permit under Section 3005 of the Resource Conservation and Recovery Act at this time. Please be advised that you must comply with all applicable State and local requirements.

You will retain your United States Environmental Protection Agency identification number, if you notified that the facility is a generator or transporter of hazardous waste.

Please contact the Authorization and Information Section at (312) 886-6148 for assistance, if you have any questions. Please refer to "Withdrawal of Part A (Non-Hazardous Waste)," in all correspondence on this matter.

Sincerely,


David A. Stringham, Chief
Solid Waste Branch

RECEIVED

FEB 20 1990

U. S. EPA, REGION V
SWB - PMS

FORM 1
GENERAL

EPA

ENVIRONMENTAL PROTECTION AGENCY
GENERAL INFORMATION
Consolidated Permits Program
(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER

F 04D 004166336

LABEL ITEMS

EPA I.D. NUMBER

III. FACILITY NAME

V. FACILITY MAILING ADDRESS

VI. FACILITY LOCATION

PLEASE PLACE LABEL IN THIS SPACE

CLOSED FACILITY - TSD ONLY

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK 'X'			SPECIFIC QUESTIONS	MARK 'X'		
	YES	NO	FORM ATTACHED		YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		X	F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP UNION CAMP CORPORATION

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title) **B. PHONE (area code & no.)**

2 SCAZZARO JAMES GENERAL MANAGER 216 248 0125

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX **B. CITY OR TOWN** **C. STATE** **D. ZIP CODE**

3 6225 CAMP INDUSTRIAL ROAD 4 SOLON OH 44139

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER **B. COUNTY NAME** **C. CITY OR TOWN** **D. STATE** **E. ZIP CODE** **F. COUNTY CODE (if known)**

5 6225 CAMP INDUSTRIAL ROAD 6 CUYAHOGA SOLON OH 44139 035

VII. SIC CODES (4-digit, in order of priority)

A. FIRST										B. SECOND									
C	7	2	6	5	3	(specify)					C	7	(specify)						
15	16	-	19	Paper Converting										15	16	-	19		
C. THIRD										D. FOURTH									
C	7	(specify)								C	7	(specify)							
15	16	-	19									15	16	-	19				

VIII. OPERATOR INFORMATION

A. NAME																																																		B. Is the name listed in Item VIII-A also the owner?																			
C	8	UNION CAMP CORPORATION																																																<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO 66																			
15	16																																																	66																			
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)																														D. PHONE (area code & no.)																																							
F = FEDERAL										M = PUBLIC (other than federal or state)										P (specify)										C A 201 628 9000																																							
S = STATE										O = OTHER (specify)										36										15 16 - 18 19 - 21 22 - 23																																							
P = PRIVATE																																																																					
E. STREET OR P.O. BOX																																																																					
1600 VALLEY ROAD																																																																					
26																																																		55																			
F. CITY OR TOWN																																								G. STATE										H. ZIP CODE										IX. INDIAN LAND									
WAYNE																																								NJ										07470										Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 52									
15 16 - 40																																								41 42 - 47										51																			

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)																														D. PSD (Air Emissions from Proposed Sources)																															
C	9	N																												C	9	P																													
15	16	17	18	30																											15	16	17	18	30																										
B. UIC (Underground Injection of Fluids)																														E. OTHER (specify)																															
C	9	U																												C	9	(specify)																													
15	16	17	18	30																											15	16	17	18	30																										
C. RCRA (Hazardous Wastes)																														E. OTHER (specify)																															
C	9	R																												C	9	(specify)																													
15	16	17	18	30																											15	16	17	18	30																										

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

Manufacturer of Corrugated Paperboard Packaging

F9 A/S1

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)																																								B. SIGNATURE																				C. DATE SIGNED																			
J. H. Neale Vice President & General Manager																																								J. H. Neale																				11/7/80																			

COMMENTS FOR OFFICIAL USE ONLY

C																																																
15	16																																															

FORM 3 RCRA
ENVIRONMENTAL PROTECTION AGENCY
HAZARDOUS WASTE PERMIT APPLICATION
Consolidated Permits Program
(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER
3368
04D00416633031

FOR OFFICIAL USE ONLY

APPLICATION APPROVED DATE RECEIVED (yr., mo., & day) COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION (place an "X" below and provide the appropriate date)

☒ 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)

☐ 2. NEW FACILITY (Complete item below.)

FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN

B. REVISED APPLICATION (place an "X" below and complete Item I above)

☐ 1. FACILITY HAS INTERIM STATUS

☐ 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES - CODES AND DESIGN CAPACITIES

A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

B. PROCESS DESIGN CAPACITY - For each code entered in column A enter the capacity of the process.

1. AMOUNT - Enter the amount.

2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PRO-CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS	PRO-CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:			Treatment:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY
TANK	S02	GALLONS OR LITERS	SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS	INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS		T04	GALLONS PER DAY OR LITERS PER DAY
Disposal:			OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)		
INJECTION WELL	D79	GALLONS OR LITERS			
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER			
LAND APPLICATION	D81	ACRES OR HECTARES			
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY			
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS			
UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE CODE
GALLONS	G	LITERS PER DAY	ACRE-FEET	A	
LITERS	L	TONS PER HOUR	HECTARE-METER	F	
CUBIC YARDS	Y	METRIC TONS PER HOUR	ACRES	B	
CUBIC METERS	C	GALLONS PER HOUR	HECTARES	Q	
GALLONS PER DAY	U	LITERS PER HOUR			

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

LINE NUMBER	A. PRO-CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY	FOR OFFICIAL USE ONLY	LINE NUMBER	A. PRO-CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY	FOR OFFICIAL USE ONLY
		1. AMOUNT (specify)				1. AMOUNT	
X-1	S 0 2	600		5			
X-2	T 0 3	20		6			
1	S 0 1	100,000 000		7			
2				8			
3				9			
4				10			

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE CODE
POUNDS P
TONS T

METRIC UNIT OF MEASURE CODE
KILOGRAMS K
METRIC TONS M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES**1. PROCESS CODES:**

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARDOUS WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

UNION CAMP CORPORATION, SOLON, OHIO

Continued from page 2.

NOTE: Photocopy this page before completing. If you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)										FOR OFFICIAL USE ONLY																			
<div style="display: flex; justify-content: space-between;"> <div> <div style="border: 1px solid black; padding: 2px;">S</div> <div style="border: 1px solid black; padding: 2px;">W</div> </div> <div> <div style="border: 1px solid black; padding: 2px;">0</div> <div style="border: 1px solid black; padding: 2px;">4</div> <div style="border: 1px solid black; padding: 2px;">H</div> <div style="border: 1px solid black; padding: 2px;">D</div> <div style="border: 1px solid black; padding: 2px;">0</div> <div style="border: 1px solid black; padding: 2px;">0</div> <div style="border: 1px solid black; padding: 2px;">4</div> <div style="border: 1px solid black; padding: 2px;">1</div> <div style="border: 1px solid black; padding: 2px;">6</div> <div style="border: 1px solid black; padding: 2px;">6</div> <div style="border: 1px solid black; padding: 2px;">3</div> <div style="border: 1px solid black; padding: 2px;">3</div> <div style="border: 1px solid black; padding: 2px;">6</div> <div style="border: 1px solid black; padding: 2px;">3</div> <div style="border: 1px solid black; padding: 2px;">1</div> </div> <div> <div style="border: 1px solid black; padding: 2px;">T/A</div> <div style="border: 1px solid black; padding: 2px;">C</div> </div> </div> <td colspan="10"> <div style="display: flex; justify-content: space-between;"> <div> <div style="border: 1px solid black; padding: 2px;">S</div> <div style="border: 1px solid black; padding: 2px;">W</div> </div> <div> <div style="border: 1px solid black; padding: 2px;">D</div> <div style="border: 1px solid black; padding: 2px;">U</div> <div style="border: 1px solid black; padding: 2px;">P</div> </div> <div> <div style="border: 1px solid black; padding: 2px;">T/A</div> <div style="border: 1px solid black; padding: 2px;">C</div> </div> </div> <td colspan="10"> <div style="display: flex; justify-content: space-between;"> <div> <div style="border: 1px solid black; padding: 2px;">3</div> <div style="border: 1px solid black; padding: 2px;">2</div> </div> <div> <div style="border: 1px solid black; padding: 2px;">D</div> <div style="border: 1px solid black; padding: 2px;">U</div> <div style="border: 1px solid black; padding: 2px;">P</div> </div> </div> </td> </td>										<div style="display: flex; justify-content: space-between;"> <div> <div style="border: 1px solid black; padding: 2px;">S</div> <div style="border: 1px solid black; padding: 2px;">W</div> </div> <div> <div style="border: 1px solid black; padding: 2px;">D</div> <div style="border: 1px solid black; padding: 2px;">U</div> <div style="border: 1px solid black; padding: 2px;">P</div> </div> <div> <div style="border: 1px solid black; padding: 2px;">T/A</div> <div style="border: 1px solid black; padding: 2px;">C</div> </div> </div> <td colspan="10"> <div style="display: flex; justify-content: space-between;"> <div> <div style="border: 1px solid black; padding: 2px;">3</div> <div style="border: 1px solid black; padding: 2px;">2</div> </div> <div> <div style="border: 1px solid black; padding: 2px;">D</div> <div style="border: 1px solid black; padding: 2px;">U</div> <div style="border: 1px solid black; padding: 2px;">P</div> </div> </div> </td>										<div style="display: flex; justify-content: space-between;"> <div> <div style="border: 1px solid black; padding: 2px;">3</div> <div style="border: 1px solid black; padding: 2px;">2</div> </div> <div> <div style="border: 1px solid black; padding: 2px;">D</div> <div style="border: 1px solid black; padding: 2px;">U</div> <div style="border: 1px solid black; padding: 2px;">P</div> </div> </div>									

V. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES												
				1. PROCESS CODES (enter)				2. PROCESS DESCRIPTION (if a code is not entered in D(1))								
				27	28	29	27	28	29	27	28	29	27	28	29	
1	D 0 0 0	750,000 000	P	S	0	1										
2	D 0 0 7															INCLUDED IN ABOVE
3																
4																
5																
6																
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24																
25																
26																

IV. DESCRIPTION OF HAZARDOUS WASTE (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. (enter from page 1)

S	F	0	4	D	0	0	4	1	6	6	3	3	6	3	6
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)

41 23 500
 81 27 300
 55 56 57 58 59 60 61 62 63 64 65

LONGITUDE (degrees, minutes, & seconds)

081 27 300
 N 41 23 500
 72 73 74 75 76 77 78 79

VIII. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code & no.)

C	E																						
15	16																						
3. STREET OR P.O. BOX												4. CITY OR TOWN				5. ST.		6. ZIP CODE					
C	F													C	G								
15	16													45	15	16	40	41	42	47	48	49	50

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

J. H. Neale

B. SIGNATURE

J. H. Neale

C. DATE SIGNED

11/7/80

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

J. J. Scazzaro

B. SIGNATURE

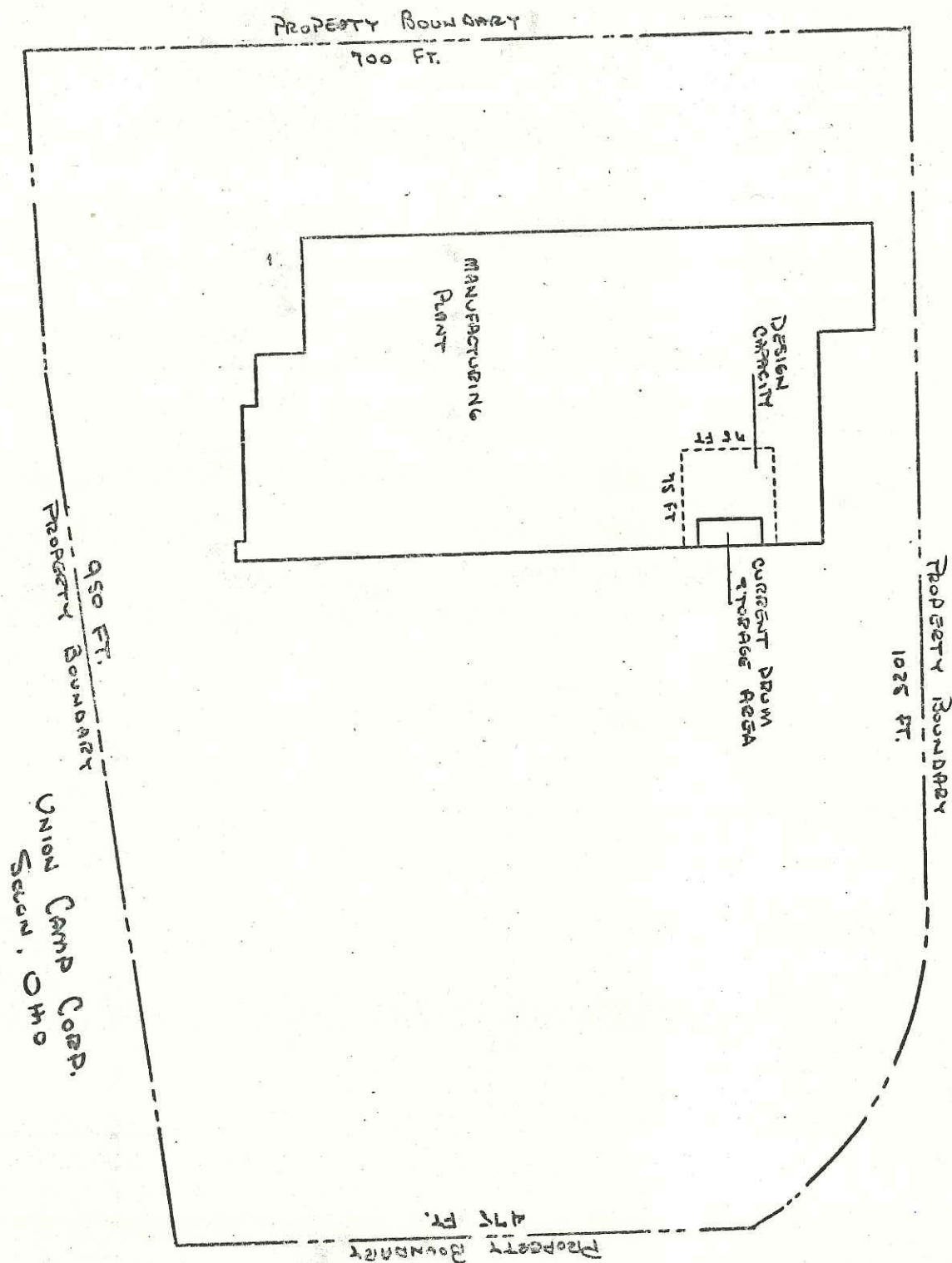
James J. Scazzaro

C. DATE SIGNED

10/27/80

V. FACILITY DRAWING (see page 4)

524



SCALE
1" = 124'-0"

UNION CAMP CORPORATION
OLON, OHIO

524



**A.4 Closure/Post-
Closure**



Re: Hazardous Waste Activity Status
U.S. EPA I.D. No. OHD004166336
Ohio Permit No. 02-18-0480

April 3, 1985

major

F.A. Manfredonia
Manufacturing Manager
Union Camp Corporation
6225 Camp Industrial Rd.
Solon, Ohio 44139

Dear F.A. Manfredonia:

According to our records, your Ohio Hazardous Waste Installation & Operation Permit has expired. Prior to the expiration of that permit, you had informed and certified to the Ohio EPA that you no longer conducted hazardous waste activity for which a permit was required.

Therefore, this letter is to inform you that, based on the information you had submitted and an investigation by Agency staff, you have gone through formal closure and will no longer be a handler of hazardous waste.

You should continue to use the identification number assigned to you by the U.S. EPA for purposes of compliance with the Ohio EPA manifest, recordkeeping and reporting requirements for generators and transporters of hazardous waste as appropriate.

Should you have any questions concerning your current status, please contact the appropriate Ohio EPA District Office (see enclosed list).

Very truly yours,

A handwritten signature in cursive script that reads "Thomas E. Crepeau".

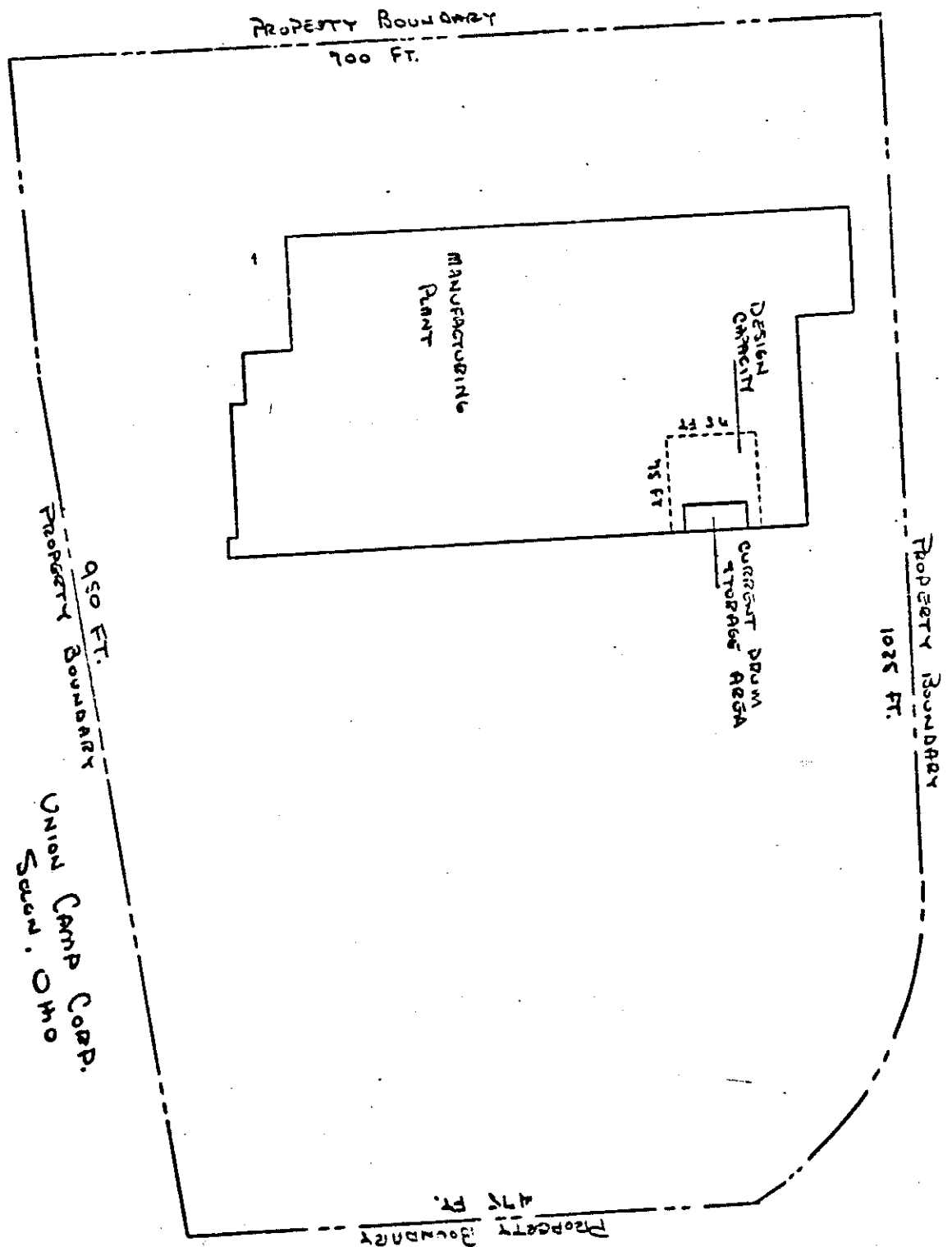
Thomas E. Crepeau, Manager
Data Management Section
Division of Solid and Hazardous Waste Management

TEC/ds

Enclosure

cc: U.S. EPA, Region V
HWFB
D.O.

1066R



SCALE
1" = 124'-0"

TABLE A

OLON, OH WASTEWATER ANALYSES

	<u>Pb (mg/l)</u>	<u>Cr (mg/l)</u>	<u>% Solids</u>	<u>Specific Gravity</u>	<u>pH</u>
RCRA Criteria Limits	5.0	5.0			
1170-ABC-Total Analysis	380	52.5	1.2	1.0011 g/ml	7.35
1170-ABC- EP Toxicity	0.7	n.d.			
1170-DEF-Total Analysis	0.6	0.7	0.17	0.9996 g/ml	8.5
1170-DEF- EP Toxicity	n.d.	n.d.			

NOV -8 1982



UNITED STATES
ENVIRONMENTAL PROTECTION AGENCY
REGION V

111 West Jackson Blvd.
CHICAGO, ILLINOIS 60604

REPLY TO ATTENTION OF:
5HW-TUB

NOV 02 1982

Mr. F.A. Manfredonia
Manufacturing Manager
Union Camp Corporation
Container Division
6225 Camp Industrial Road
Solon, Ohio 44139

CONT. TECH.
NOV 12 1982

RE: OHD004166336
Union Camp Container Division
Solon, Ohio

Dear Mr. Manfredonia:


Your closure plan for 15 drums of old waste removed to an off-site facility has been subjected to a 30-day period of public comments. No comments were received.

It is our understanding that since your process has changed, you no longer will store hazardous wastes. Since your closure was already complete when you notified us, and we have a copy of your manifest, we will accept a completed copy of manifest number MI 022 9702 (signed by the TSD) and your letter of July 29, 1982, as adequate certification of closure. *Treatment, Storage or Disposal Facility*

At this time, your division of Union Camp will be removed from our data base since your testing of your new process wastes have proved to be non-hazardous.

Please call Mrs. Elizabeth Utley of my staff at (312) 886-6162, if you have further questions.

Sincerely,


Basil G. Constantelos, Director
Waste Management Division

cc: Tom Carlisle, OEPA

Mr. F.A. Manfredonia
Manufacturing Manager
Union Camp Corporation
Container Division
6225 Camp Industrial Road
Solon, Ohio 44139

not a shield { End, however

RE: OHDO04166336
Union Camp Container Division
Solon, Ohio

Dear Mr. Manfredonia:

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Please call Mrs. Elizabeth Utley of my staff at (312) 886-6162, if you have further questions.

Sincerely,

**Basil G. Constantelos, Director
Waste Management Division**

cc: Tom Carlisle, OEPA

5KM-TUB:LIZ UTLEY:PG:10-12-82

TPS
CHIEF

10/22/82

10/25/82

11/1

11/2

PRC Environmental Management, Inc.
233 North Michigan Avenue
Suite 1621
Chicago, IL 60601
312-856-8700
Fax 312-938-0118

RECEIVED
WMD RECORD CENTER

JAN 03 1995



**PRELIMINARY ASSESSMENT/
VISUAL SITE INSPECTION**

**UNION CAMP CORPORATION
SOLON, OHIO 44139
OHD 004 166 336**

FINAL REPORT

Prepared for

**U.S. ENVIRONMENTAL PROTECTION AGENCY
Office of Waste Programs Enforcement
Washington, DC 20460**

Work Assignment No.	:	C05087
EPA Region	:	5
Site No.	:	OHD 004 166 336
Date Prepared	:	December 17, 1991
Contract No.	:	68-W9-0006
PRC No.	:	009-C05087OH56
Prepared by	:	PRC Environmental Management, Inc. Catherine Cooney
Contractor Project Manager	:	Shin Ahn
Telephone No.	:	(312) 856-8700
EPA Work Assignment Manager	:	Kevin Pierard
Telephone No.	:	(312) 886-4448

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EXECUTIVE SUMMARY

PRC Environmental Management, Inc. (PRC), performed a preliminary assessment and visual site inspection (PA/VSI) to identify and assess the existence and likelihood of releases from solid waste management units (SWMUs) and other areas of concern (AOCs) at the Union Camp Corporation (Union Camp) facility in Solon, Ohio. This report summarizes the results of the PA/VSI and evaluates the potential for releases of hazardous wastes or hazardous constituents from SWMUs and AOCs identified. In addition, a completed U.S. Environmental Protection Agency (EPA) Preliminary Assessment Form (EPA Form 2070-12) is included in Attachment A to assist in prioritization of Resource Conservation and Recovery Act (RCRA) facilities.

The Union Camp Corporation facility is located on a 15-acre site in Solon, Cuyahoga County, Ohio (longitude 81°27'30"W; latitude 41°23'50"N). The facility is situated in a primarily light industrial area with some residential neighborhoods within 1/2 mile. Many small ponds and lakes are within a 2-mile radius of the facility. Briar Hill Lake is located 1 mile to the northeast of the facility; the Chagrin State Scenic River is located 3-1/2 miles to the west of the facility. Union Camp is not located in a 100-year flood plain.

The Union Camp facility has been in operation since 1968. Union Camp produces corrugated paperboard and currently employs 106 people at the Solon facility. Production volume ranges from 30 to 40 thousand tons of finished product per year.

Union Camp converts paper into corrugated containers. Bulk paper is processed into corrugated paperboard sheets which are heated and laminated with a starch-based solution. A vinyl adhesive is used to bind a backing to the corrugated sheets. Packages of various sizes are then cut out of the sheets. Roll printers are used to imprint labels using flexographic inks. Union Camp also operates a maintenance shop for its equipment. The processes have remained basically unchanged since 1968.

In 1981, Union Camp obtained RCRA interim status to operate as a hazardous waste facility. Wastes generated by Union Camp include ink wash waters; spent solvents (mineral spirits); and waste oils. On April 15, 1982, Union Camp requested that U.S. EPA withdraw Union Camp's RCRA Part A permit application. Union Camp submitted a closure plan for its hazardous waste drum storage area along with a waste disposal manifest for fifteen 55-gallon drums of ink wash water to U.S. EPA on July 29, 1982. These were submitted simultaneously because Union

Camp had already implemented its closure plan. U.S. EPA approved certification of closure on November 2, 1982. Prior to 1982, the ink wash water generated at the facility was classified hazardous because of high levels of lead (D008) and chromium (D007). Starting in 1982, Union Camp changed its ink formula to one that contained lower levels of lead and chromium. The resulting wash water generated from the printing operations proved to be nonhazardous. Consequently, after closure in July 1982, all wash water was collected in floor sumps, pumped to a holding tank, and discharged to the sanitary sewer system. Other wastes Union Camp generates include waste oils used for maintenance and solvents (mineral spirits) used for cleaning parts. These wastes are stored in 55-gallon drums and sent offsite for reclamation.

The PA/VSI identified the following three SWMUs at the facility:

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Solid Waste Management Units

1. Floor Sumps and Wash Water Holding Tank
2. Former Hazardous Waste Drum Storage Area
3. Nonhazardous Waste Drum Storage Area

No AOCs were identified at the facility.

No releases to ground water or surface water were observed during the PA/VSI nor have any documented releases been identified. The potential for release to these media is low because all SWMUs are located indoors. Nonhazardous wash water is discharged to the sanitary sewer system; all other wastes are stored in sealed drums on a concrete floor. The distance to the nearest surface water also limits the potential for a release to this media.

No releases to air were observed during the PA/VSI nor have any documented releases been identified. The potential for release to air is low because all SWMUs are located indoors. Nonhazardous wash water is discharged to the sanitary sewer system; all other wastes are stored in sealed drums on a concrete floor. The building limits the potential of a release to this media.

No releases to on-site soil were observed during the PA/VSI nor have any documented releases been identified. The potential for release to on-site soil is low because all SWMUs are located indoors. Nonhazardous wash water is discharged to the sanitary sewer system; all other wastes are stored in sealed drums on a concrete floor.

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Access to the site is limited. The facility is bounded on the north by a warehouse, on the east by Camp Industrial Road, and on the south and west by railroad tracks. Possible receptors include residents of Solon, located less than 1/2-mile southeast of the facility. The threat of contamination via ground water, surface water, air or on-site soil from the facility is low; therefore, the risk for human exposure to contamination from the facility is low.

The potential for any release of hazardous wastes or hazardous constituents from this facility is low. As a result, PRC recommends no further action at this time.

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1.0 INTRODUCTION

PRC Environmental Management, Inc. (PRC), received Work Assignment No. C05087 from the U.S. Environmental Protection Agency (EPA) under Contract No. 68-W9-0006 (TES 9) to conduct preliminary assessments (PAs) and visual site inspections (VSIs) of hazardous waste treatment and storage facilities in EPA Region 5.

As part of the EPA Region 5 Environmental Priorities Initiative, the Resource Conservation and Recovery Act (RCRA) and Comprehensive Environmental Response, Compensation and Liability Act (CERCLA) programs are working together to identify and address RCRA facilities that have a high priority for corrective action using applicable RCRA and CERCLA authorities. The PA/VSI is the first step in the process of prioritizing facilities for corrective action. Through the PA/VSI process, enough information is obtained to characterize a facility's actual or potential release(s) to the environment from solid waste management units (SWMUs) and areas of concern (AOCs).

A SWMU is defined as any discernible unit at a RCRA facility in which solid wastes have been placed and from which hazardous constituents might migrate, regardless of whether the unit was intended to manage solid or hazardous waste.

The SWMU definition includes the following:

- RCRA-regulated units, such as container storage areas, tanks, surface impoundments, waste piles, land treatment units, landfills, incinerators, and underground injection wells.
- Closed and abandoned units.
- Recycling units, wastewater treatment units, and other units that EPA has generally exempted from standards applicable to hazardous waste management units.
- Areas contaminated by routine and systematic releases of wastes or hazardous constituents. Such areas might include a wood preservative drippage area, a loading-unloading area, or an area where solvent used to wash large parts has continually dripped onto soils.

An AOC is defined as any area where a release to the environment of hazardous waste or constituents has occurred or is suspected to have occurred on a nonroutine and nonsystematic

basis. This includes any area where such a release in the future is judged to be a strong possibility.

The purpose of the PA is as follows:

- Identify SWMUs and AOCs at the facility.
- Obtain information on the operational history of the facility.
- Obtain information on releases from any units at the facility.
- Identify data gaps and other informational needs to be filled during the VSI.

The PA generally includes review of all relevant documents and files located at state offices and at the EPA Region 5 office in Chicago.

The purpose of the VSI is as follows:

- Identify SWMUs and AOCs not discovered during the PA.
- Identify releases not discovered during the PA.
- Provide a specific description of the environmental setting.
- Provide information on release pathways and the potential for releases to each medium.
- Confirm information obtained during the PA regarding operations, SWMUs, AOCs, and releases.

The VSI includes interviewing facility staff, inspecting the entire facility to identify all SWMUs and AOCs, photographing all SWMUs, identifying evidence of releases, initially identifying potential sampling locations, and obtaining all information necessary to complete the PA/VSI report.

This report documents the results of a PA/VSI of the Union Camp Corporation facility in Solon, Ohio. The PA was completed on April 16, 1991, when PRC gathered and reviewed information from Ohio EPA and from U.S. EPA Region 5 RCRA files. The VSI was conducted

on July 10, 1991. It included interviews with facility representatives and a walk-through inspection of the facility. Three SWMUs and no AOCs were identified at the facility.

PRC completed EPA Form 2070-12 using information gathered during the PA/VSI. This form is included in Attachment A. The VSI is summarized and inspection photographs are included in Attachment B. Field notes from the VSI are included in Attachment C. Analytical results of the current wash water and UST removal are presented in Attachments D and E, respectively.

2.0 FACILITY DESCRIPTION

This section describes the facility's location, past and present operations (including waste management practices), waste generating processes, release history, regulatory history, environmental setting, and receptors.

2.1 FACILITY LOCATION

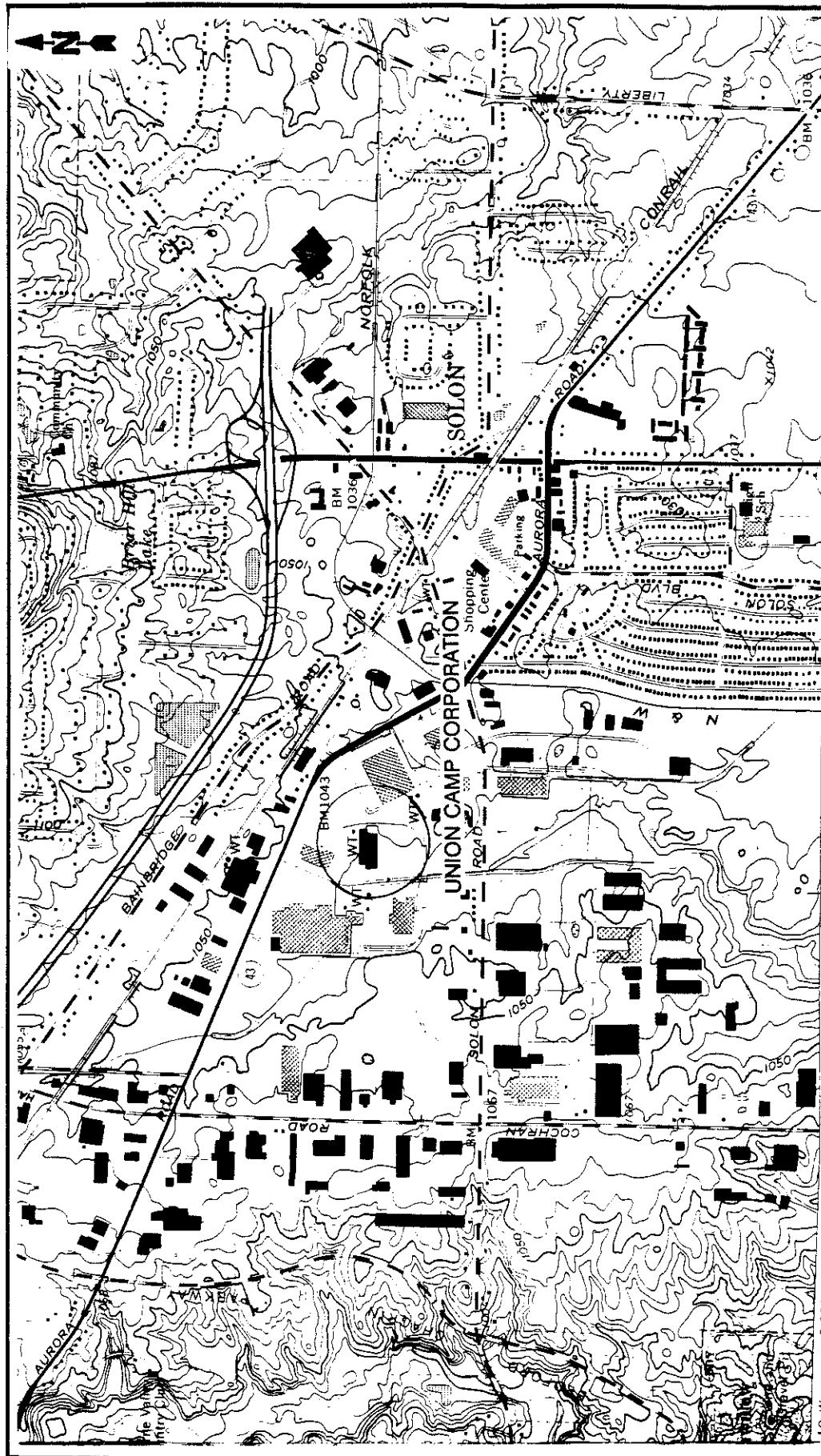
The Union Camp Corporation is located at 6255 Camp Industrial Road in Solon, Cuyahoga County, Ohio (longitude 81°27'30"W; latitude 41°23'50"N) (see Figure 1) (Union Camp, 1980b). The facility is approximately 10 miles southeast of the city of Cleveland and 20 miles southeast of Lake Erie. The Union Camp site occupies approximately 15 acres; buildings and other structures on the site occupy approximately 2.5 acres of the total acreage.

The facility is bordered on the north by a warehouse, on the east by Camp Industrial Road, and on the south and west by railroad tracks. The area surrounding Union Camp Corporation is primarily occupied by light industrial operations with some residential neighborhoods within 1/2 mile of the facility.

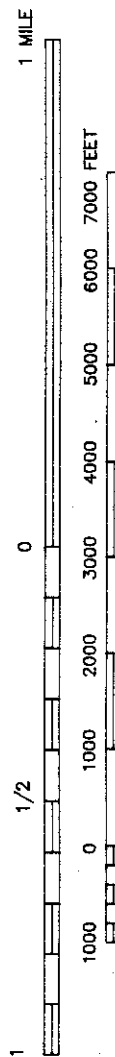
2.2 FACILITY OPERATIONS

The Union Camp facility has been in operation since 1968. Union Camp produces corrugated paperboard packaging and currently employs 106 people. Production volume ranges from 30,000 to 40,000 tons of finished product per year (Union Camp, 1991).

Union Camp converts paper into corrugated containers. Bulk paper is processed into corrugated paperboard sheets which are heated and laminated with starch. A solution of adhesive, cornstarch, borax, and an antibacterial agent is applied after the sheets are heated. A vinyl adhesive is used to bind a backing to the corrugated sheets. Packages of various sizes are then cut out of the sheets. Roll printers are used to imprint labels using flexographic inks. Union Camp also operates a maintenance shop for its equipment. The processes have remained basically unchanged since 1968 (Union Camp, 1991). Figure 2 shows the facility layout.



SCALE 1:24000



UNION CAMP CORPORATION
CHAGRIN FALLS, OHIO

FIGURE 1
FACILITY LOCATION

SOURCE: USGS, 1984

PRC ENVIRONMENTAL MANAGEMENT, INC.

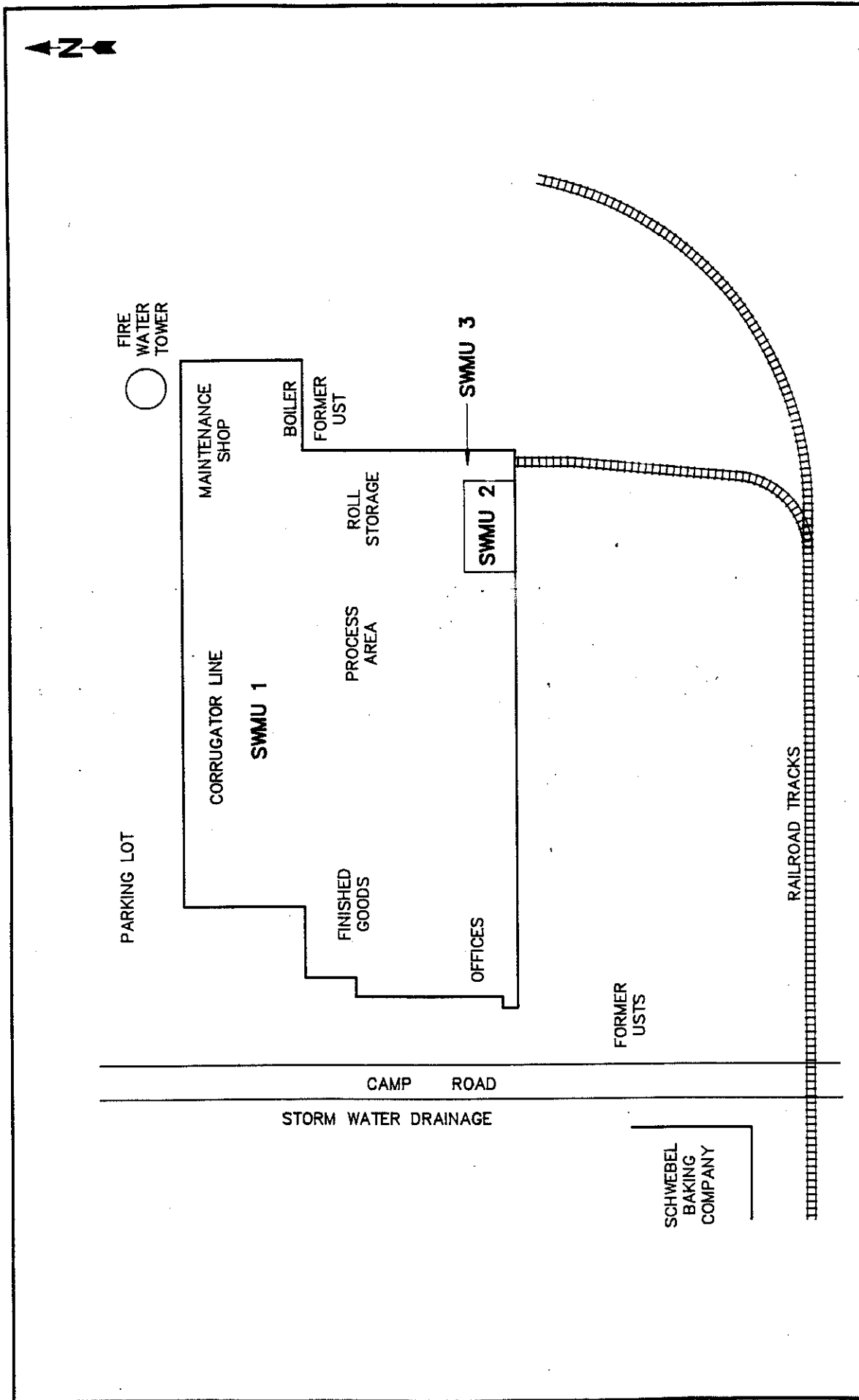
SOURCE: UNION CAMP FILES

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UNION CAMP CORPORATION
SOLON, OHIO

FIGURE 2
FACILITY LAYOUT

PRC ENVIRONMENTAL MANAGEMENT, INC.



The printing equipment is cleaned between applications; the wash water is collected in floor sumps (SWMUs 1 and 2) surrounding the equipment and discharged to the sanitary sewer system. Spent solvents used for cleaning and waste oils used for maintenance of the equipment are stored in 55-gallon drums (SWMU 3) for disposal or reclamation offsite. Table 1 lists the solid waste management units and their current status.

2.3 WASTE GENERATING PROCESSES

The primary waste generated by Union Camp is scrap paperboard. The paperboard is shredded, baled, and shipped to mills for recycling or sale. Other wastes generated at the facility include starch wash water and ink wash water from converting operations. Starch wash water is generated during lamination of corrugated sheets. Small amounts of starch sludge are generated; this sludge is washed into a drain leading to the municipal sanitary sewer system. Ink wash water is generated from washing the roll printers after their use. The ink wash water is collected in floor sumps (SWMU 1) next to each printer and pumped to a holding tank (SWMU 1). The ink wash water in the holding tank is discharged directly to the sanitary sewer system. Small quantities of waste oils and solvents are also generated during maintenance and cleaning operations. The waste oils and solvents are accumulated in 55-gallon drums and stored in a nonhazardous drum storage area (SWMU 3) in the southeast corner of the building. Waste oil and solvents are collected by Ullmen Oil and disposed of offsite approximately every 6 months. Table 2 lists the solid wastes generated at the facility, their source, and the units in which they are managed.

Until 1982, the wash water contained diluted flexographic inks containing elevated levels of chromium and lead pigments. These wastes were collected and stored on-site in 55-gallon drums. The drums were stored in the hazardous waste drum storage area (SWMU 2). During closure, a total of 15 55-gallon drums were removed and disposed of at an approved hazardous waste disposal facility on July 9, 1982. Subsequently, the facility switched to an ink containing lower concentrations of these metals. Analytical tests of the new ink wash water indicated that it was nonhazardous. Separate treatment of the ink wash water as hazardous waste was no longer necessary and the water could be discharged to the sanitary sewer system. Analytical results of two recent wash-water samples are provided in Attachment D.

Table 1
Solid Waste Management Units (SWMUs)

SWMU Number	SWMU Name	RCRA Hazardous Waste Management Unit*	Status
1	Floor Sumps and Wash Water Holding Tank	Yes	RCRA Closure Approved by U.S. EPA on November 2, 1982; Currently Active
2	Former Hazardous Waste Drum Storage Area	Yes	RCRA Closure Approved by U.S. EPA on November 2, 1982; Currently Inactive
3	Nonhazardous Waste Drum Storage Area	No	Active

* A RCRA hazardous waste management unit is one that currently requires or formerly required a RCRA Part A or Part B permit.

Table 2
Solid Wastes

Waste/EPA Waste Code	Source	Primary Management Unit
Nonhazardous Wash Water	Printing Process	1
Washwaters Containing Chromium (D007) and Lead (D008)	Printing Process	1 and 2
Waste Oils	Maintenance	3
Spent Solvents	Cleaning	3

2.4 RELEASE HISTORY

There are no documented releases of hazardous waste or hazardous constituents from this facility into ground water, surface water, air, or soil. During the PA/VSI, some stains were found on the floor in the present drum storage area (SWMU 3). These stains are around the waste oil drums and on the sides of the waste oil drums (PRC, 1991).

2.5 REGULATORY HISTORY

Union Camp submitted a Notification of Hazardous Waste Activity to U.S. EPA in October 1980 (Union Camp, 1980a). The notification identified Union Camp as a generator of hazardous wastes containing lead (D008) and chromium (D007). The facility subsequently submitted a RCRA Part A permit application in November 1980 to the U.S. EPA to treat and store hazardous waste on-site in a drum storage area (SWMU 2) (Union Camp, 1980b). The facility was issued a permit (No. 02-18-0480) from the Ohio State Hazardous Waste Facility Approval Board on August 26, 1981 (Ohio EPA, 1981b).

The facility submitted a request for withdrawal of its RCRA Part A hazardous waste permit application on April 15, 1982 (Union Camp, 1982a). Union Camp submitted a closure plan along with a waste disposal manifest (No. MI0229702) on July 29, 1982 for 15 55-gallon drums of ink wash water (Union Camp, 1982b). The U.S. EPA approved Union Camp's certification of closure on November 2, 1982 (U.S. EPA, 1982). The facility now operates as a small quantity generator and stores only waste oil and solvents in the nonhazardous drum storage area (SWMU 3).

The facility had three underground storage tanks (USTs) which were removed in 1989. The tanks held gasoline and diesel fuel. The tanks were tested for system tightness, excavated, and removed from the property. After the USTs were removed, soil samples were taken to verify that the surrounding areas were clean. On December 13, 1989, the Ohio Department of Commerce verified the closure assessment report for the UST removal (White, 1989). Approximate locations of the USTs are shown in Figure 2. Analytical results from the soil samples can be found in Attachment E.

Union Camp has been cited in the past for violating applicable hazardous waste regulations. Specifically, Union Camp has been cited for violations concerning waste analysis (40

CFR Section 265.13) and contingency plan requirements (40 CFR Section 265.52) (Ohio EPA, 1981a).

The Union Camp facility is not subject to the notification requirements under Section 103 (c) of CERCLA. No information was obtained on any other CERCLA requirements or actions regarding this facility.

Union Camp has not applied for Clean Water Act National Pollutant Discharge Elimination System (NPDES) permits.

No information was obtained on any air permits held by the facility.

2.6 ENVIRONMENTAL SETTING

This section describes the climate, flood plain and surface water, geology and soils, and ground water in the regional area of the Union Camp facility.

2.6.1 Climate

Average temperatures in Cleveland, which is 10 miles northwest of Solon, range from a low of 26 degrees Fahrenheit (°F) in January to a high of 72 °F in July. Northern areas nearest Lake Erie are markedly colder than the rest of the area in summer. Precipitation is well distributed during the year. From late fall through winter, snow squalls are frequent and total snowfall is normally heavy. Of the total annual precipitation, 60 percent usually falls in April through September. Average annual precipitation is 35.4 inches. Average annual net precipitation is 4.5 inches and the intensity of a 1-year 24-hour rainfall is 2 inches. Average relative humidity in mid-afternoon is about 60 percent. Humidity is greater at night, and the average at dawn is about 80 percent. The percentage of possible sunshine is 70 percent in summer and 30 percent in winter. The prevailing wind direction is from the south. Average wind speed is highest, 13 miles per hour, in January (National Oceanic and Atmospheric Administration, 1990).

2.6.2 Flood Plain and Surface Water

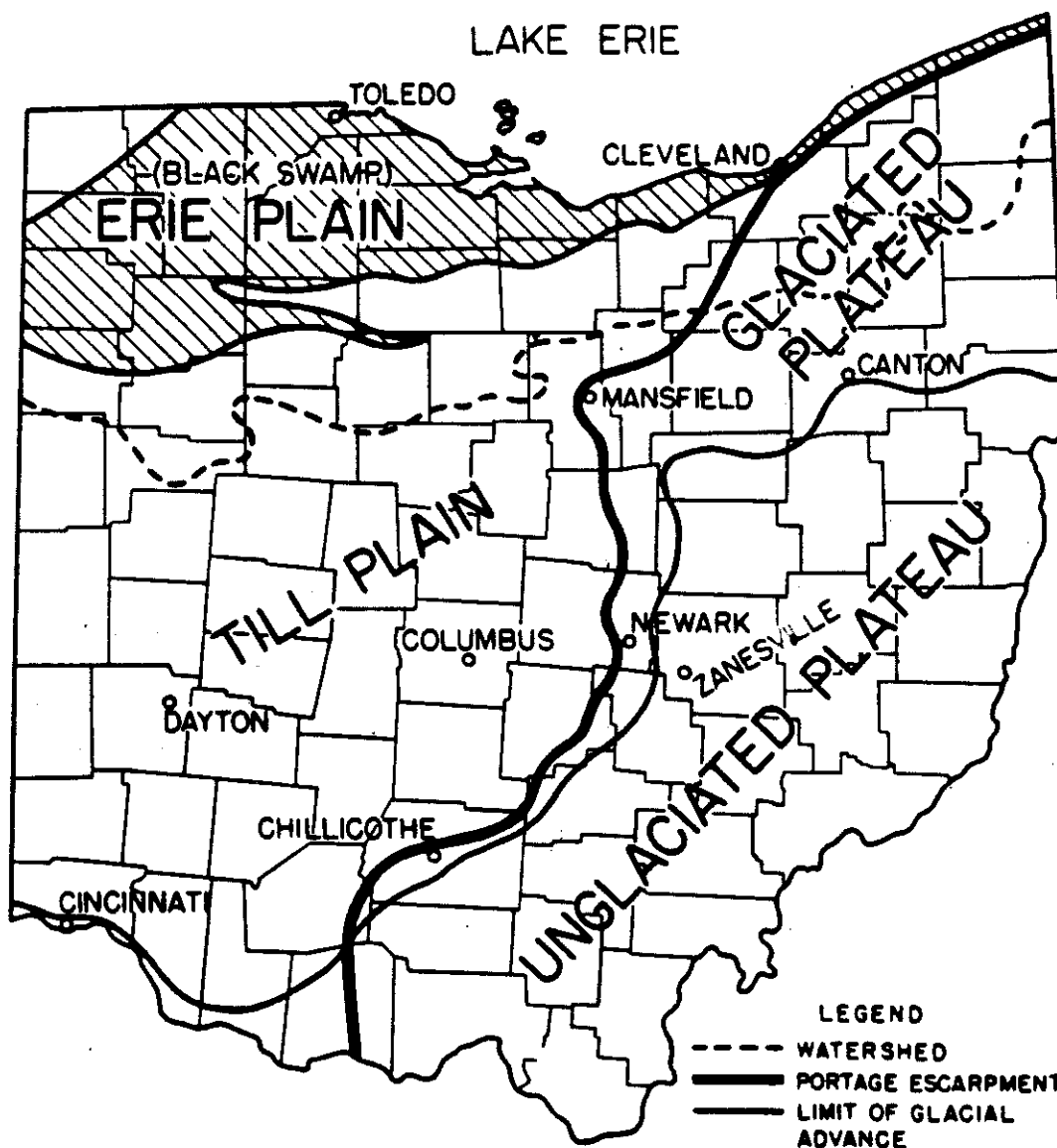
The Union Camp facility is located less than 1 mile southwest of Briar Hill Lake, and approximately 3-1/2 miles from Chagrin State Scenic River. The area is also dotted with smaller ponds and lakes varying in sizes, all within a 2-mile radius of the facility. The facility is not located in a 100-year flood plain (U.S. Geological Survey [USGS], 1974).

2.6.3 Geology and Soils

The exposed rocks of the area are of sedimentary origin and range in age from late Devonian to Pleistocene. They fall into two general classes: indurated stratified rocks of late Devonian and early Carboniferous age, and unconsolidated surficial deposits of Pleistocene age. The surficial deposits consist mainly of Pleistocene glacial and lacustrine deposits of recent alluvium. These Pleistocene deposits form a blanket ranging in thickness from 0 to 440 feet. The indurated rocks everywhere underlie the Pleistocene deposits and crop out in the beds and gorges of streams, quarries, and other excavations. The total thickness of Paleozoic strata exposed in this area is about 750 feet. These beds consist of shale, sandstone, and conglomerate of late Devonian, early Mississippian, and early Pennsylvanian age (Cushing et al., 1931).

As seen in Figures 3 and 4, the rock sections at Cleveland, separated by varying thicknesses of weak shale, mark the surface of the Appalachian Plateau and the two lesser platforms on the slope of the Portage escarpment. The uppermost of the rocks in this formation is the Sharon conglomerate, of lower Pennsylvanian age. It is the youngest exposed Paleozoic rock in this area, and is the capstone formation of the plateau across northeastern Ohio. Below the Sharon conglomerate, other formations include: the Orangeville and Meadville shales of Mississippian age; the Cleveland and Bedford shales, classed by some as Upper Devonian and by others as lower Mississippian age, and the Chagrin shale of the upper Devonian age. Figure 5 shows these rocks as they appear in the area below the Cleveland area (Cushing et al., 1931).

Exposed rocks are underlain by large thicknesses of Devonian, Silurian, and Ordovician formations, and presumably of Cambrian also, resting on a floor of Pre-Cambrian crystalline rocks. The soils of the area around the facility are made up mostly of Mahoning soil and Urban land. This combination of soils is generally found in broad areas, on till plains in the higher parts of the lake plains. The soil near the facility is composed of approximately 55 percent Mahoning



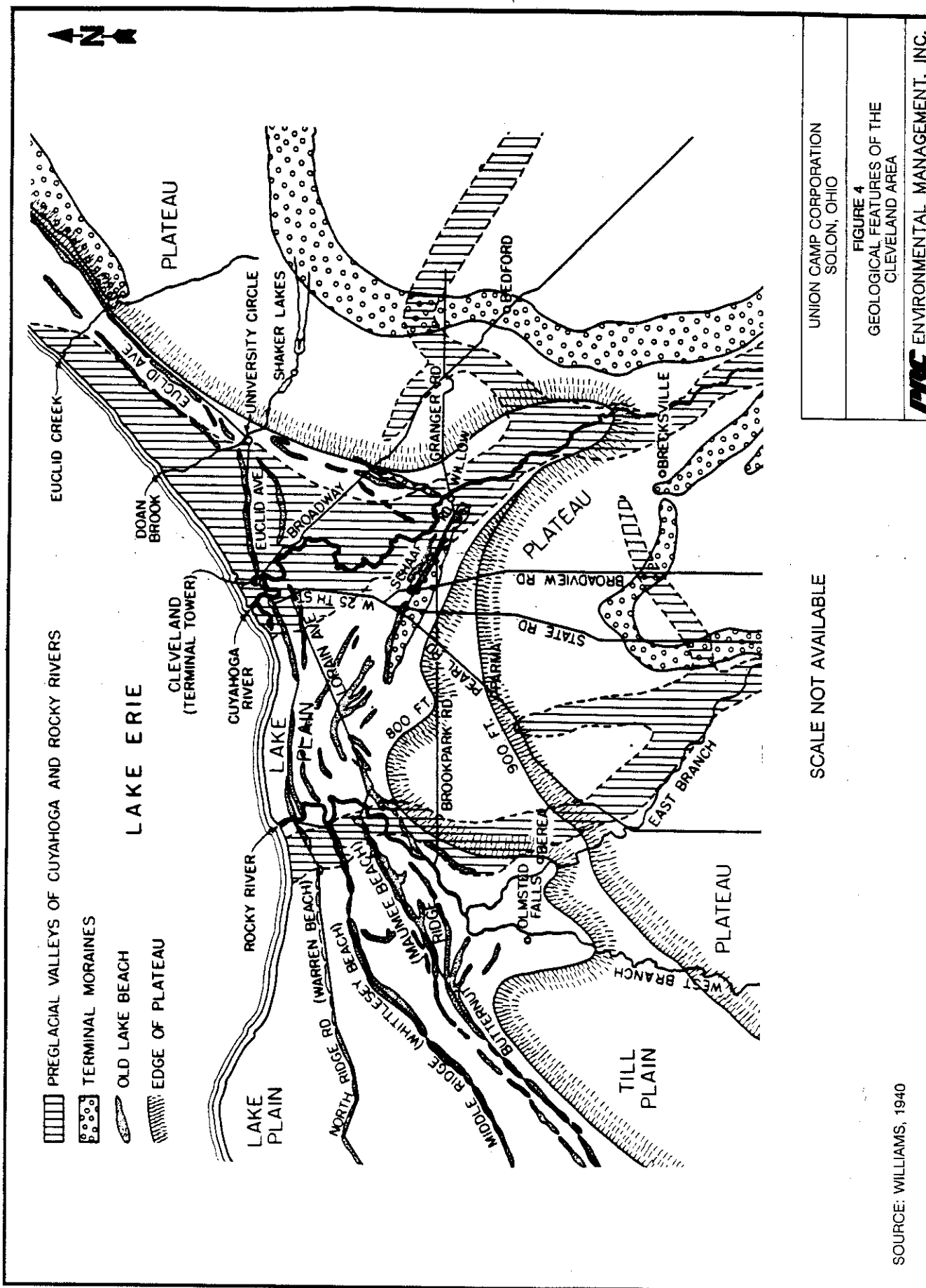
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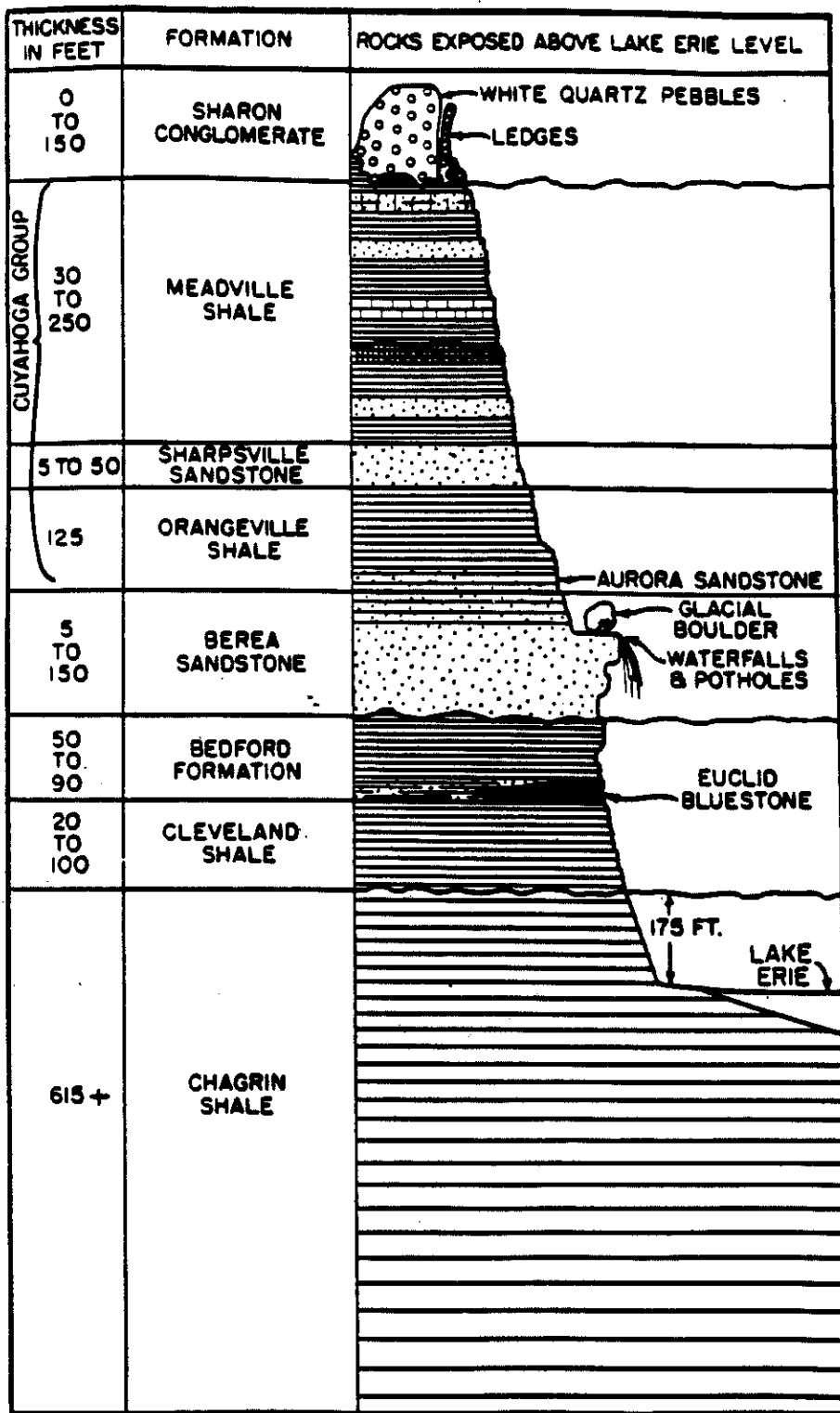
SOURCE: WILLIAMS, 1940

UNION CAMP CORPORATION
SOLON, OHIO

FIGURE 3
PHYSIOGRAPHIC BOUNDARY LINES IN OHIO

PRC ENVIRONMENTAL MANAGEMENT, INC.





UNION CAMP CORPORATION
 SOLON, OHIO

FIGURE 5
 REPRESENTATIVE GEOLOGIC CROSS-SECTION
 OF THE CLEVELAND AREA

EMC ENVIRONMENTAL MANAGEMENT, INC.

SOURCE: WILLIAMS, 1940

silt loam and 30 percent Urban land. The areas of Mahoning soil are so intricately mixed with other soils it is extremely difficult to map them separately. The soil association in this area is known as the Mahoning-Urban land complex. These are nearly level to very gently sloping areas, with somewhat poorly drained soils. Typically, the Mahoning soil has a surface layer of dark grayish brown, friable silt loam about 7 inches thick. The subsoil is about 32 inches thick, made up of yellowish brown to olive brown silty clay loam that is mottled and firm. Mahoning-Urban land soil complex is mostly used as fill material in parks, open space, building sites, lawns and gardens. However, it is generally unsuited as a site for most sanitary facilities because of its poor drainage qualities.

2.6.4 Ground Water

Most of the population of the Solon area obtains its water supply from the Cleveland Municipal Water Supply, which draws from Lake Erie. However, there are many alterations of sand and gravel within the clay in the glacial drift that are capable of storing large amounts of water. The contact of the glacial drift with the underlying Bedford, Orangeville, and Meadville shales is also a source of water, especially where the drift is thick and consists largely of sand and gravel. There are also water-bearing sandstone strata within the Cleveland, Chagrin, and underlying shales of Portage age (Cushing et al., 1931); however, the immediate area around the facility is underlain largely by sand and gravel, where water occurs in thin and narrow, often discontinuous coarse sand and gravel lenses. Wells commonly yield a ground-water flow rate of 5 to 10 gallons per minute. However, some wells may penetrate the entire thickness of valley fill and encounter no satisfactory aquifers.

2.7 RECEPTORS

The facility is located approximately 1 mile northwest of downtown Solon, Ohio. The population of Solon is approximately 13,340. The nearest homes are located 1/2-mile south of the facility on Solon Road. The immediate area is primarily occupied by light industries. The Schwebel Baking Company is just west of Union Camp on the west side of Camp Industrial Road. Venture Lighting International is to the east of the facility on Aurora Road.

The facility is not surrounded by a fence. A Honeywell Security System prevents unauthorized access to the facility during off hours.

The city of Solon is supplied with drinking water by the Cleveland Municipal Water Supply. Approximately 3,800 residences are supplied by this source (Hromco, 1991). The intake for the water supply draws from Lake Erie, 20 miles to the northwest. Many small lakes and ponds, all within a 1/2- to 2-mile radius of the facility. The two largest water bodies are Briar Hill Lake, less than 1 mile from the facility, and Chagrin State Scenic River, 3-1/2 miles from the site. No sensitive environments such as public parks, critical wildlife habitats, or wetlands are located within a 2-mile radius of the facility (USGS, 1984a).

3.0 SOLID WASTE MANAGEMENT UNITS

This section describes the three SWMUs identified during the PA/VSL. The following information is presented for each SWMU: description of the unit, dates of operation, wastes managed, release controls, history of release, and PRC observations.

SWMU 1

Floor Sumps and Wash Water Holding Tank

Unit Description: The floor sumps are located next to each piece of printing machinery. The sumps collect wash water used to clean the equipment. The wash water collects in the sumps and is pumped to a holding tank. The wash water is then discharged to the sanitary sewer system at a rate of approximately 300 to 400 gallons per day (McDarby, 1991). Until 1982, the wash water collected in the sumps was classified as hazardous because it contained high amounts of lead (D008) and chromium (D007). This hazardous wash water was contained in 55-gallon drums and stored in the former hazardous waste drum storage area (SWMU 2). Starting in 1982, the ink contained sufficiently low levels of lead and chromium to be classified as nonhazardous. After the unit (SWMU 1) underwent closure in July 1982, all wash water was pumped to the holding tank and subsequently discharged to the sanitary sewer system. Photograph 1 in Attachment B shows a sump surrounding a roller machine.

Date of Startup: 1968

Date of Closure: The unit underwent RCRA closure on July 29, 1982. The U.S. EPA approved closure certification on November 2, 1982. The unit is currently operating.

Wastes Managed: Flexographic ink wash water containing chromium (D007) and lead (D008) pigments until July 1982. Starting in July 1982, the waste was nonhazardous wash water.

Release Controls: The sumps are made of concrete and wash water in the sumps is pumped to a holding tank. The holding tank then discharges the wash water to the sanitary sewer system.

History of Release: There have been no documented releases of hazardous wastes or hazardous constituents from this unit.

Observations: The unit appeared in good condition (PRC, 1991).

SWMU 2

Former Hazardous Waste Drum Storage Area

Unit Description: This unit consisted of 55-gallon drums stored indoors on a concrete floor near the southeast corner of the building. The unit measured approximately 20 feet by 20 feet. The unit had a capacity of 15 55-gallon drums. In 1982, the unit went through closure and is now inactive. The

contents of the drums were tested for EP toxicity for lead and chromium. They were also tested for total lead and chromium, percent solids, specific gravity, and pH. Photograph 2 in Attachment B shows the unit.

Date of Startup: 1968

Date of Closure: The unit underwent RCRA closure on July 29, 1982. The U.S. EPA approved closure certification on November 2, 1982.

Wastes Managed: Hazardous flexographic ink wash water containing (D007, D008) chromium and lead pigments.

Release Controls: The drums were stored on a concrete floor in the corner of the building. Sheet metal walls to the south and east acted as secondary containment.

History of Release: There have been no documented releases of hazardous wastes or hazardous constituents from this unit.

Observations: The area stores large rolls of paper (PRC, 1991).

SWMU 3

Nonhazardous Waste Drum Storage Area

Unit Description: This unit is located in the southeast corner of the facility. The unit has a concrete floor and is bounded on the south and east by a sheet-metal wall. The unit measures approximately 20 feet by 20 feet. The total storage capacity of the unit is 15 drums. Drums containing waste oils and solvents (mineral spirits) are stored on wooden pallets. Waste oils and solvents are taken offsite and recycled or disposed of by Ullmen Oil approximately every 6 months. Photograph 3 in Attachment B shows this area.

Date of Startup: 1968

Date of Closure: The unit is still in operation.

Wastes Managed: The unit stores waste solvents (mineral spirits) and waste oils.

Release Controls: The unit is on a concrete floor with a 12-inch berm serving as containment. Sheet-metal walls to the south and east act as secondary containment.

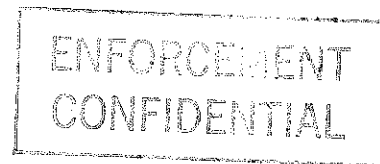
History of Release: There have been no documented releases of hazardous wastes or hazardous constituents from this unit.

Observations: The floor appeared to be in good condition (no cracks), although there are some stains on the floor in the area around the drums. Drums were on wooden pallets on the concrete floor during the VSI (PRC, 1991).

4.0 AREAS OF CONCERN

PRC identified no AOCs during the PA/VSI.

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5.0 CONCLUSIONS AND RECOMMENDATIONS

The PA/VSI identified three SWMUs at the Union Camp facility. Background information on the facility's location, operations, waste generating processes, release history, regulatory history, environmental setting, and receptors is presented in Section 2.0. SWMU-specific information, such as the unit's description, dates of operation, wastes managed, release controls, release history, and observed condition, is discussed in Section 3.0. Following are PRC's conclusions and recommendations for each SWMU. Table 3 identifies the SWMUs at the Union Camp facility and suggested further actions.

SWMU 1

Floor Sumps and Wash Water Holding Tank

Conclusions:

This unit consists of floor sumps surrounding every printing machine. The sumps collect wash water used to clean the equipment. The water in the sumps is pumped to a holding tank and then discharged to the sanitary sewer system. Management of hazardous wastes in this unit ceased in 1981. RCRA closure was approved by U.S. EPA on November 2, 1982. The unit currently manages nonhazardous wastes. The unit poses a low threat of current or future releases. The probability of a release to environmental media is summarized below.

Ground Water: Low; the unit is indoors and discharges to the sanitary sewer system.

Surface Water: Low; the unit is indoors and discharges to the sanitary sewer system.

Air: Low; this unit is indoors, the building acts as secondary containment.

On-site Soil: Low; the unit is indoors and discharges to the sanitary sewer system.

Recommendations:

PRC recommends no further action at this time.

SWMU 2

Former Hazardous Waste Drum Storage Area

Conclusions:

This unit formerly stored hazardous wash water in 55-gallon drums on a concrete pad. Hazardous waste storage in this unit ceased in July 1982. RCRA closure was approved by U.S. EPA on November 2, 1982. The unit poses a low threat of current or future releases. The probability of a release to environmental media is summarized below.

Ground Water: Low; the unit is indoors and no longer handles wastes.

Surface Water: Low; the unit is indoors and no longer handles wastes.

RELEASED
DATE 3/2/00
RIN #
INITIALS WV

ENFORCEMENT
CONFIDENTIAL

Table 3

SWMU Summary

SWMU	Operational Dates	Evidence of Release	Suggested Further Action
Floor Sumps and Wash Water Holding Tank	1968 - present	None	No further action
Former Hazardous Waste Drum Storage Area	1968 - 1982	None	No further action
Nonhazardous Waste Drum Storage Area	1968 - present	None	No further action

RELEASED
DATE 3/2/00
RIN #
INITIALS WV

ENFORCEMENT
CONFIDENTIAL

Air: Low; the unit is indoors and no longer handles wastes.

On-site Soil: Low; the unit is indoors and no longer handles wastes.

Recommendations: PRC recommends no further action at this time.

SWMU 3

Nonhazardous Waste Drum Storage Area

Conclusions: This unit stores spent solvents and waste oils in 55-gallon drums on a concrete floor. The unit poses a low threat of current or future releases. The probability of a release to environmental media is summarized below.

Ground Water: Low; the unit is indoors on a concrete floor. The floor and surrounding walls act as secondary containment.

Surface Water: Low; the unit is indoors on a concrete floor. The floor and surrounding walls act as secondary containment. The distance to the nearest surface water also limits the potential of a release to this media.

Air: Low; the unit is indoors on a concrete floor. The building limits the potential of a release to this media.

On-site Soil: Low; the unit is indoors on a concrete floor. The floor and surrounding walls act as secondary containment.

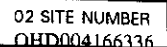
Recommendations: PRC recommends no further action at this time.

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ATTACHMENT A

EPA PRELIMINARY ASSESSMENT FORM 2070-12





POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE
OH

02 SITE NUMBER
OHD004166336

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: 0

04 NARRATIVE DESCRIPTION

01 ☐ B. SURFACE WATER CONTAMINATION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

The nearest surface water is Briar Hill Lake located 1 mile from the facility.

01 ☒ C. CONTAMINATION OF AIR

02 ☐ OBSERVED (DATE: _____)

☒ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: 0-100

04 NARRATIVE DESCRIPTION

Wastes generated include volatile mineral spirits. The building limits the potential of a release to this media.

01 ☒ D. FIRE/EXPLOSIVE CONDITIONS

02 ☐ OBSERVED (DATE: _____)

☒ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: 0-100

04 NARRATIVE DESCRIPTION

The facility manages ignitable mineral spirits.

01 ☐ E. DIRECT CONTACT

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

Access to the site is limited.

01 ☐ F. CONTAMINATION OF SOIL

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

03 AREA POTENTIALLY AFFECTED: _____
(Acres)

04 NARRATIVE DESCRIPTION

All USTs have been removed.

01 ☐ G. DRINKING WATER CONTAMINATION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

City of Solon is supplied with drinking water by Cleveland Municipal Water Supply.

01 ☒ H. WORKER EXPOSURE/INJURY

02 ☐ OBSERVED (DATE: _____)

☒ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: 0-100

04 NARRATIVE DESCRIPTION

Workers could be exposed to fumes and fire hazard posed by mineral spirits.

01 ☐ I. POPULATION EXPOSURE/INJURY

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: 0

04 NARRATIVE DESCRIPTION

None.



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE
OH

02 SITE NUMBER
OHD004166336

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

None

01 ☐ K. DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

None

01 ☐ L. CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

None

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES
03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

None

01 ☐ N. DAMAGE TO OFF-SITE PROPERTY
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

None

01 ☐ O. CONTAMINATION OF SEWERS, DRAINS, WWTPS
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

None

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

None

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: 0-100 site workers

IV. COMMENTS

Site appears to present a minimal threat to human health and the environment.

V. SOURCES OF INFORMATION (Cite specific references; e.g., state files, sample analysis, reports)

Preliminary review of U.S. and Ohio EPA files.
Visual Site Inspection (July 10, 1991).

ATTACHMENT B

VISUAL SITE INSPECTION SUMMARY AND PHOTOGRAPHS

VISUAL SITE INSPECTION SUMMARY

**Union Camp Corporation
Solon, Ohio 44139
OHD 004 166 336**

Date: July 10, 1991

Facility Representatives: Guy Hunt III, Union Camp Corporation, Environmental Specialist, (404) 621-2215
David Burns, Union Camp Corporation, Quality Systems Manager, (216) 248-0125
James Thornton, Union Camp Corporation, Specialist - Water Resources (912) 238-7483
Dennis McDarby, Union Camp Corporation, Plant Manufacturing Manager, (216) 248-0125

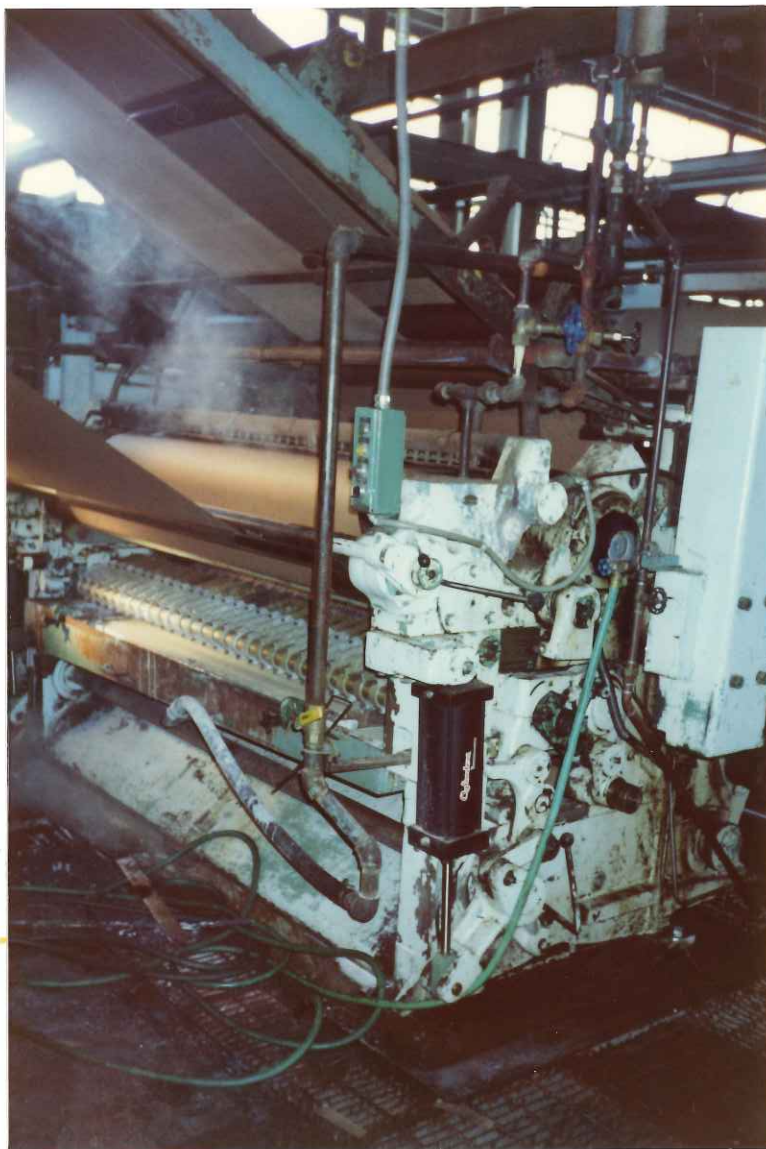
Inspection Team: Paul Wooldridge, PRC Environmental Management, Inc., (703) 883-8846
Catherine Cooney, PRC Environmental Management, Inc., (215) 972-0470

Photographer: Catherine Cooney

Weather Conditions: Warm, 70-80°F

Summary of Activities: The visual site inspection began at 10:10 a.m. at the Union Camp facility in Solon, Ohio. Paul Wooldridge reviewed the purpose of the VSI and the overall U.S. EPA Region 5 Environmental Priorities Initiative program with the Union Camp representatives. Union Camp representatives then gave an overview of the history of the facility and the operations taking place at the plant. Waste generation, storage, and disposal were discussed at length. Photographs taken during the VSI are presented in the following pages.

A tour of the facility began at 11:10 a.m. The PRC team inspected all SWMUs at the facility. At approximately 11:40 a.m., the PRC and Union Camp representatives returned to the conference room for debriefing. After a brief exit interview, the PRC team left the facility at 11:45 a.m.



Photograph No. 1

Orientation: North

Description: Photograph shows floor sumps surrounding a roller machine.

Location: SWMU 1

Date: July 10, 1991



Photograph No. 2

Orientation: Southwest

Location: SWMU 2

Date: July 10, 1991

Description: Photograph shows the former hazardous waste drum storage area. Paper rolls were stored in the area at the time of the VSI.



Photograph No. 3

Orientation: Northwest

Location: SWMU 3

Date: July 10, 1991

Description: Photograph shows nonhazardous waste drum storage area.

ATTACHMENT C
VISUAL SITE INSPECTION FIELD NOTES

42

3-21-91 PW

Room at west side
of bldg.

- Was used for production
of in paint process

- cleared out, except for
steel beams that held
equipment.

Raccoon creek bridge
shrine on W side of
building

n 10-15' wide, shallow
Thine = closest surface water
to site.

1220 Finish inspection, wrap-up.

1225 PW, PH offsite.

1-12-91

CMSS

10:10 AM

43

Guy Hunt - Lonsdale
Bldg

Dave Evans

James Norton

Union camp still in MG?
yes.

PRC: Paul Weatheridge
Cathy Hardy

Paul - intro - explained
eyes years of EBT. Experienced

EPI

- No need that should not be
photographed.

Process some more - 1181

Dennis McDermott

42

5-21-91

Room at	West side
of	block.

- was used for production of in paint processes
- cleaned out, except for steel beams that held equipment.

Raccoon creek bridge

drive on W side of building

✓
~ 10' - 15' wide, shallow

This = closest surface water to site.

1270 Finish inspection, wrap-up.

1225	AW, DH	offsite
------	--------	---------

7-10-91 CMH

5

Guy Hunt - Environmental

2

Dennis McDaby

Diane Brown

James Thorton

Union camp still in N.Y.?
yes.

5

PPC: Paul Woodbridge

Cathy Hardy

Paul - intro - explained we are
eye & ear of EEA. Explained
EPI

- No ones that should not be photographed

Process type use 1981

44 7-10-91 CMT

Paul asked about more analytical data.

Dave went out to get us data from water sampling done by State

Paul asked if boilers were for power for facility. Yes.

Size of property? Ted will get a copy of map that shows exact property.

Are there any underground storage tanks? yes there were three - they were removed. - they were

7-10-91 CMT

what did tanks contain?

Ted: fuel, diesel, gas. taken out about 2 yrs ago. there were ^{soil} samples taken.

Ted: no leakage. they were pressure tested before taken out. They will get copies of full for us.

Any minor spills?

no spills of > 55 gallon drums. Ted: nothing major

Where has waste oil come from: transport prohibition.

Butlin manufacturing makes solvents, w/ parts wash station there dumped w/ waste oil & lube oil.

57

7-10-91

233

White Solvents Stored 50 ft.
away in buckets. I'd
it considerable Satellite accumulation.
Area ^{labeled} ~~labeled~~ ^{can be} WO (waste
oil) and

7.

Who takes water the well men oil

Processes that generate waste:

Waste paper: Shredded, banded

• taken away for recycling

Starch Adhesive: adhesive,

Orthostachys, box, preventive

Antibacterial agent. Some

does go down drain. The

Study is a girl

7-10-91	CMT	47
---------	-----	----

- Process Study: paper from mills,
make corrugated sheets. Machine
heated 350-380° for moisture removal
liner laminated w/ starch.
Goes to heat hot platting then
starch reaches 140° then gels
together. Starch washwater goes in
drains on floor to Funtary Sluice.

- the converting area to wheat
which is used,

Printing process - flexographic

(Same as newspapers) Use

adhesive. Print it, stick it,

Scorpius

What kind of painting does?

Roll pencil

48

7-10-91 CMH

slat sludge from what
is left on machine &
from water that washes
rollers & ~~the~~ flumes system.
This is into wash water.

Are there any other processes
at facility that discharge
into stream. NO

Vinyl adhesive is like cleaners
glue. minute waste.

Any other chemicals NO -
only detergents.

any coolants or boilers -
NO.

49

7-10-91 CMH

Access Roads - 2. There is
road. Access roads used
to ship finished products.
They have here iron pipes
coming off rail (to receive
materials)

Previous land use -

For 1967 - this facility was built
1968 - opened

Union Camp built this facility
operations began in 1968.
Process has stayed same
since.

Duron Storage Area. They
still store Duron. It
is on concrete floor.

50 CM #

7-10-91

Ted: There is a drum rock.
The drum storage racks have
been there for 20 yrs. They
only store Oils & Solvents.
There is no floor drain
in the area. Maybe the
40 ft away.
Sheet metal walls
Bermed 10 inches wide

Paul brought up inspections
from 1981-82 no one ^{CMH} ~~inspected~~
Recalled any.

Paul showed everyone map
Ted confirmed map is
being basically same as
one they would send up.

CMH

7-10-91

50 S1

are there any floor pits
has drum over. Ted about 30 ft
feet away for water softeners
(for boilers).

Paul: ink went into floor
pits they dumped. ^{cm #}
(^{groundwater from} the heavy metal ink)
then they got CMH put tape
around area. old was then
stated they were non-hazardous
& they got rid of them

Paul asked - when wash water
went through drums they were

52

7-10-91

CMH

What kind of ink
now used: Flexographic
water soluble ink

Waste water system: all
waste water goes to station
& not to ditch outside
that Paul noticed on way
in.

Overroad land use:
distance to nearest home.

Ted: 1/2 mile down road
Paul:
Also my body use ground
water to drink. They don't
know. But Ted said they are
or city water.

CMH

7-10-91

CMH

53

Paul asked if "creek or 'drainage'?"
they said it is probably
considered drainage ditch.

Paul asked
Do any facilities around here RRA
TSD? Nobody knew.

Are there any nearby
schools? Maybe high school
is 3 miles

do 19,000^{eight} per population?
yes.

Security: Monogull security
system. No fence just
building. No guard post
system.

54

7-10-91 CMH

55

7-10-91 CMH

do there a 2nd chapter
 Dennis said yes. I skip
 paragraphs from 530
 to 12.

-we (Paul & Cathy) were
 was play & safety glasses

11:10 Tour

Manufacturing

James: do we get copies
 of report? Paul understood
 they can request it &
 may have to go through
 FOIA.

Picture 1 floor drains in
 manure were house ^{on} ink
 pens. SW orientation.

Paul asked if there is
 evidence of storage tanks.

Send pictures to ~~Dept of~~ ^{Guy} ~~area~~

Ted said yes, we will see
 them on the tour

Picture 2 baled paper for
 recycling Packages here &
 shipped to Maryland.

11:05 meeting ended

Picture 3 ^{concrete}
 Corrugated Saw drains on
 floor with water N.

34

7-10-91 CMH

7-10-91 CMH

57

drums of good oils &
solvents & much general
waste oil & drums of
waste oil & solvents

Paul asked about any
transformers to it. There
is only one. No PCB.

Picture 4 - NW. drum storage
area. 5 WD drums
(Black drums on ground)

Weather very sunny & warm

UST area on back 10,000 gallon
fuel oil

East side of building (near
broken room.)

Picture 5 - drum of waste solvent
- floor drain area

Picture 7 - old
farmer

Picture 7 - old SW

State General Manufacturing Co.

Washburn drum storage area

Picture 6 - label on solvent

Picture 8 - location of old UST

Ted: waste oil keeps there for
years.

Get there for fuel - might for
gas. One diesel one gas.

Ted: stored chemical waste? from
solvent

Both less than 10,000.

has been there for at least
1 1/2 yrs.

SW corner

11:45 End of

tour.

ATTACHMENT D
ANALYTICAL RESULTS OF CURRENT WASH WATER

KUDUKIS WASTEWATER LABS, INC.

2779 BROADWAY AVENUE, CLEVELAND, OHIO 44115

(216) 696 - 0280 FAX: (216) 696 - 6831

ANALYSIS CERTIFIED BY: John Ondo

 Laboratory Manager

Client Union Camp
Camp Industrial Road
Solon, OH 44139

Report Date: March 6, 1991

P.O. #: _____

Client: UNI005

Sample Received: 2/91

Lab Sample #: _____

Attn: Rick Manfredonia

Sample I.D.: #1 - 24 Hr. wastewater composite, 2/20-2/21/91
#2 - Wastewater grab, 2/21/91

ANALYSIS	#1	#2	#3	#4	ANALYSIS	#1	#2	#3	#4
Metals:	Total mg/L	—	—	—	Acidity (CaCO ₃)				
Cadmium					Alkalinity (CaCO ₃)				
Chromium: Total					Bacteria:				
Hexavalent					F. Coliform/100ml				
Trivalent					T. Coliform/100ml				
Copper					Total Plate Count/1ml				
Lead	<0.05				Chloride				
Nickel					Chlorine: T. Res.				
Silver					Conductivity - uMHOS/cm				
Zinc					Cyanide: Total				
					Amenable				
					Free				
Aluminum					Reactive				
Antimony					Flash Point °F				
Arsenic					Fluoride				
Barium					Hardness (CaCO ₃)				
Beryllium					MBAS				
Calcium					Nitrogen: Nitrate (N)				
Iron					Nitrite (N)				
Magnesium					Ammonia (N)				
Manganese					T Kjeldahl (N)				
Mercury					Oil & Grease mg/L		22		
Potassium					Oxygen Demand: BOD₅				
Selenium					COD				
Silicon					pH				
Sodium					Phenols				
Thallium					Phosphorus: Total (P) mg/L	2			
Tin					Residue: Total				
					Total Volatile				
					Suspended				
					Volatile Suspended				
					Sulfate				
					Sulfide: Total				
					Reactive				

ug/L = micrograms/Liter(ppb) • mg/L = milligrams/Liter(ppm) • mg/kg = milligrams/kilogram • > = greater than • < = less than (below detection)

Sampled By: Client _____ KWLI xx D-1 Auto Sampler xx Other _____

KUDUKIS WASTEWATER LABS, INC.

2779 BROADWAY AVENUE, CLEVELAND, OHIO 44115

(216) 696 - 0280 FAX: (216) 696 - 6831

ANALYSIS CERTIFIED BY: John Ondo

JO Laboratory Manager

Client Union Camp Corp.
Camp Industrial Road
Solon, OH 44139

Attn: Rich Manfredonia

Report Date: 4/30/91

P.O. #:

Client:

Sample Received: 4/17/91

Lab Sample #:

Sample I.D.: #1 - Wastewater composite - 4/16-4/17/91
#2 - Wastewater Grab - 4/17/91

ANALYSIS	#1	#2	#3	#4	ANALYSIS	#1	#2	#3	#4
Metals:	Total	—	—	—	Acidity (CaCO ₃)				
	Mg/L				Alkalinity (CaCO ₃)				
Cadmium					Bacteria:				
Chromium: Total					F. Coliform/100ml				
Hexavalent					T. Coliform/100ml				
Trivalent					Total Plate Count/1ml				
Copper					Chloride				
Lead	<50				Chlorine: T. Res.				
Nickel					Conductivity - uMHOS/cm				
Silver					Cyanide: Total				
Zinc					Amenable				
					Free				
Aluminum					Reactive				
Antimony					Flash Point °F				
Arsenic					Fluoride				
Barium					Hardness (CaCO ₃)				
Beryllium					MBAS				
Calcium					Nitrogen: Nitrate (N)				
Iron					Nitrite (N)				
Magnesium					Ammonia (N)				
Manganese					T Kjeldahl (N)				
Mercury					Oil & Grease mg/L		27		
Potassium					Oxygen Demand: BOD ₅				
Selenium					COD				
Silicon					pH				
Sodium					Phenols				
Thallium					Phosphorus: Total (P) mg/L	1.9			
Tin					Residue: Total				
					Total Volatile				
					Suspended				
					Volatile Suspended				
					Sulfate				
					Sulfide: Total				
					Reactive				

ug/L = micrograms/Liter(ppb) • mg/L = milligrams/Liter(ppm) • mg/kg = milligrams/kilogram • > = greater than • < = less than (below detection)

Sampled By: Client _____ KWLI XX D-2 Auto Sampler XX Other _____

ATTACHMENT E

ANALYTICAL RESULTS OF SOIL SAMPLES FROM UST REMOVAL

SOIL ANALYSES

SAMPLE NUMBER	1	5	6
PARAMETER			
Moisture % WET WT	22.6	17.0	19.1
Petroleumhydrocarbons UG/G-DRY	129	<33.5	56.1
Benzene UG/KG-DRY	<120	<110	<114
Ethylbenzene UG/KG-DRY	<120	<110	<114
Toluene UG/KG-DRY	<120	<110	<114
Xylenes, total UG/KG-DRY	<239	<219	<227

October 3, 1989 HNu calibration: Initial span = 5.0
Adjusted span = 4.7

October 4, 1989 HNu calibration: Initial span = 5.0
Adjusted span = 4.6

Source: White, 1989



CONTAINER DIVISION 6225 CAMP INDUSTRIAL RD., SOLON, OHIO 44139 TELEPHONE (216) 248-0125

July 29, 1982



RECEIVED

AUG 2 1982

WASTE MANAGEMENT BRANCH
EPA REGION V

Ms. Kathy Homer
U.S. EPA Region V
RCRA Activities
P.O. Box A 3587
Chicago, IL 60690

Dear Ms. Homer:

Enclosed is a closure plan for Union Camp Corporation's, Solon, OH, corrugated container plant's hazardous waste storage facility.

The fifteen drums have been removed from the storage area and disposed of in an approved hazardous waste disposal facility. I have enclosed a copy of the waste disposal manifest.

I have also notified Ms. Helen Takas of the Ohio EPA, Twinsburg office (216-425-9171) of our closure plan.

Please notify me of any further requirements we must comply to effectively remove our plant from the hazardous waste storage program.

Sincerely,

A handwritten signature in blue ink, appearing to read "F. A. Manfredonia".

F. A. Manfredonia
Manufacturing Manager

/mp1

Note:

OHD-004-166-336
GTSD, PA

DKT

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI 0229702

Generator's Name Union Camp Corporation		Primary Transporter's Name Browning Ferris Ind. of Mich. Inc.		Treatment, Storage or Disposal Facility Chem. Plant Services	
Site Address 6225 Comp. Industrial Road		Transporter's Address 5400 Cogswell		Facility Address 18550 Allen Rd.	
City Solon Ohio 44139		City Wayne Michigan 48184		City Wyandotte Michigan 48192	
Phone Number (216) 348-2125		Phone Number (313) 729-8200		Phone Number (313) 282-9250	
Generator's Site EPA I.D. Number 04805411663361		Transporter's EPA I.D. Number MI100533352999		Facility Site EPA I.D. Number MI100969631194	

If more than one transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Type	Form	Total Weight or Volume	Units	Haz. or Liquid Waste Number
1.	Hazardous Waste Liquid N.O.S. (Waste Ink)	ORM-E	NA 9189	1215	Dr.					91018
2.										
3.										
4.										
5.										
6.										

Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

If the shipment cannot be delivered, describe the reasons for non-delivery.

Generator Signature 	Date Shipped MO. DAY YEAR 7 9 82
Transporter Signature 	Date(s) Received 6 7 9 82
Subsequent transporter(s) signature(s)	

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

Describe any significant discrepancies between manifest and shipment.

TSDF Signature 	Date Received 6 7 9 82
Facility Site EPA I.D. Number	
Was a Surcharge Assessed?	<input type="checkbox"/> Yes <input type="checkbox"/> No

CLOSURE PLAN
HAZARDOUS WASTE STORAGE FACILITY
UNION CAMP CORPORATION
OLON, OHIO

The hazardous waste storage facility consists of an area in the plant for the storage of metal drums containing flexographic ink washwater and sludge. The metal drums are stored on a concrete floor.

Closure will consist of removing the drums to an approved hazardous waste disposal facility by the manifest procedure. An analysis of the contents will be provided to the disposal company.

An estimate of the maximum inventory of this waste in storage is 15 drums.

The waste is the result of cleanup of printing equipment. Floor pits in which the waste was initially collected have been purged with non-hazardous washwater since discontinuing the use of inks which resulted in hazardous waste.

Any leaks or spills of hazardous waste from the drums in the storage area will be absorbed by an inert compound and stored in new drums for removal. The floor will be washed after such a cleanup.

This type of hazardous waste has not been generated since the elimination of old ink inventory in 1981. Closure is estimated to take place in 1982.

DRAFT



CONTAINER DIVISION 6225 CAMP INDUSTRIAL RD., SOLON, OHIO 44139 TELEPHONE (216) 248-0125

C. E. RAGLIN
General Manager
Cleveland

April 15, 1982

g. TSO, PA

EPA Region V
RCRA Activities
PO Box 7861
Chicago, Illinois 60680

Dear Sir:

lms
Our corrugated box plant in Solon, Ohio submitted a Part A Hazardous Waste Permit Application in November, 1980 as a storage facility in accordance with RCRA regulations. We obtained EPA I.D. #OHD004166336. At that time the hazardous waste consisted of flexographic ink washwater and sludge which contained small amounts of lead and chromium pigments. These wastes may have exceeded the limits for these metals in the EP toxicity test.

Since that time the inks have been changed to eliminate these pigments and further testing demonstrates that the washwater and sludge is clearly not a hazardous waste by RCRA definition. We are also notifying the Ohio EPA in Columbus, Ohio.

We wish to withdraw our Hazardous Waste Permit Application for this facility based on the above change in our operation. Any hazardous waste in storage will be disposed in accordance with Ohio and EPA regulations for such disposal. Please advise if any other action is required.

Very truly yours,

General Manager

RECEIVED

MAY 4 1982

WASTE MANAGEMENT BRANCH
EPA REGION V

RECEIVED
5/10/82

CLOSURE PLAN
HAZARDOUS WASTE STORAGE FACILITY
UNION CAMP CORPORATION
SOLON, OHIO

The hazardous waste storage facility consists of an area in the plant for the storage of metal drums containing flexographic ink washwater and sludge. The metal drums are stored on a concrete floor.

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This type of hazardous waste has not been generated since the elimination of old ink inventory in 1981. Closure is estimated to take place in 1982.

**C.2 Compliance
And Enforcement**



CONTAINER
DIVISION
ENGINEERING
AND TECHNOLOGY
DEPARTMENT

1975 LAKESIDE DRIVE, SUITE 314, TUCKER, GA 30084-5865 TELEPHONE (404) 621-2215

February 12, 1990

U.S. EPA Region V
RCRA Activities
PO Box A-3587
Chicago, IL 60690

Subject: Union Camp Solon, Ohio
OH0004166336

Dear Sir:

Attached is the corrected Hazardous Waste Activity printout. If you have any questions, please feel free to contact me at (404) 621-2214.

Sincerely,

A handwritten signature in blue ink that reads "Michael P. MacDonald".

Michael P. MacDonald
Environmental Resources Mgr.

MPM/lb/B:6

Attachment

RECEIVED

FEB 20 1990

U. S. EPA, REGION V
SWB — PMS

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS) ☒ Act 136 Waste ☐ Other ☐ MI 022970

Generator's Name Waste Corp Corporation	Primary Transporter's Name Browning Ferris Ind. of Mich. Inc.	Treatment, Storage or Disposal Facility Chem Met Services
Site Address 6225 Comp. Industrial Road Salon Ohio 44139	Transporters Address 5400 Cogswell Wayne Michigan 48184	Facility Address 18550 Allen Rd. Wyandotte Michigan 48192
Phone Number (216) 943-0125	Phone Number (313) 729-8200	Phone Number (313) 282-9250
Generator's Site EPA ID. Number 01210104116131361	Transporter's EPA ID. Number MI 1D053313158199	Facility Site EPA ID. Number MI 1D096969631194

If more than one Transporter is to be utilized, give the Name and EPA ID. Number of each:

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container	Form	Total Weight or Volume	Units	Hazardous or Liquid Waste Num.
1.	Hazardous Waste Liquid N.O.S. (Waste Ink)	ORM-E	NA 9189	11215 Dr.	No. Type	Solid Liquid Gas			101018
2.									
3.									
4.									
5.									
6.									

Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA34 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature 		Date Shipped MO. DAY YEAR 7 9 82
	Transporter Vehicle I.D. No. No. 1 71229	Transporter Signature 	Date(s) Received MO. DAY YEAR 07 09 82
	Subsequent Transporter Vehicle I.D. No's	Subsequent transporter(s) signature(s)	

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature 	Date Received
	Facility Site EPA ID. Number	<input type="checkbox"/> Accepted <input type="checkbox"/> Rejected

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed?
☐ Yes
☐ No



CONTAINER DIVISION 6225 CAMP INDUSTRIAL RD., SOLON, OHIO 44139 TELEPHONE (216) 248-0125

November 15, 1982

RECEIVED

NOV 18 1982

WASTE MANAGEMENT BRANCH
EPA, REGION V

Mrs. Elizabeth Utley
United States EPA Region V
111 West Jackson Blvd.
Chicago, IL 60604

Dear Mrs. Utley:

Enclosed is a completed copy of the Manifest (MI0229702) you requested in your letter received by Union Camp Corporation on November 8, 1982.

It is my understanding this will complete the U.S.EPA requirement to allow our plant to be removed from your data base. I would greatly appreciate a letter from you confirming our removal from the program.

Please call me if you have any further questions.

Sincerely,


F. A. Manfredonia

/mpl

cc: B. Parry
L. Swec

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)

☐ Act 136 Waste

☐ Other

MI 022970

Generator's Name Union Camp Corporation		Primary Transporter's Name Prochem Services Inc.		Treatment, Storage or Disposal Facility Union Camp Services	
Site Address 6925 Court Industrial Road Salon Ohio 44139		Transporter's Address 5400 Capital Wayne Michigan 48184		Facility Address 18220 Allen Rd. Livonette Michigan 48150	
Phone Number (416) 248-0125		Phone Number (313) 729-6000		Phone Number (313) 242-9250	
Generator's Site EPA I.D. Number 000000000000000000		Transporter's EPA I.D. Number 000000000000000000		Facility Site EPA I.D. Number 000000000000000000	

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name)	D.O.T. Hazard Class	UN/N.A. No.	Haz. Class Code	Container	Form	Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Sludge
1.	Hazardous Waste Liquid NO. 2 (Acetic Acid)	ORM-E	NA 9199 11315						
2.									
3.									
4.									
5.									
6.									

Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

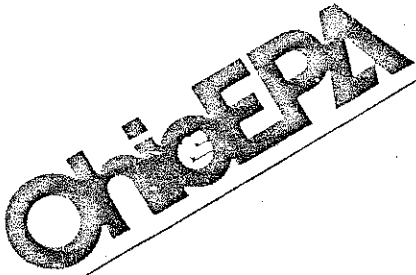
If the shipment cannot be delivered, describe the reasons for non-delivery.

Generator Signature		Date Shipped MO. DAY YEAR
Transporter Signature		Date(s) Received
Subsequent transporter(s) signature(s)		

TSD/CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSD/C Signature		Date Received
Facility Site EPA I.D. Number		Accepted <input checked="" type="checkbox"/> Rejected <input type="checkbox"/>
Was a Surcharge Assessed?		Yes <input type="checkbox"/> No <input type="checkbox"/>

Describe any significant discrepancies between manifest and shipment.



Re: DHMM
Union Camp Corporation
Cuyahoga County
02-18-0480

Union Camp Corporation
6225 Camp Industrial Road
Solon, Ohio 44139

June 28, 1982

Attn: F.A. Manfredonia

Dear Mr. Manfredonia:

On June 17, 1982, this writer met with you and Anita Carter to conduct an inspection of your facility with regard to hazardous materials management. Facility operations were also reviewed at this time to evaluate the company's request to withdraw from the hazardous waste permit system.

The hazardous waste which had been generated at the facility was the ink wash-water which had high concentrations of lead and cadmium. The facility has switched to an ink with much lower concentrations of these metals. The levels of lead and cadmium now present in the washwater are below the hazardous waste criteria level. Furthermore, the ink washwater is disposed of through the City of Solon Wastewater Treatment Plant.

As a result of these changes, Union Camp Corporation in Solon is no longer a generator of hazardous wastes. At the time of my inspection, however, 14 55-gallon drums of the old ink washwater were still being stored in the hazardous waste storage area. Therefore, the inspection conducted on June 17th concerned the hazardous waste storage activities at the site.

At the time of the inspection, the facility was in general compliance with the applicable state and federal hazardous waste regulations. A copy of the inspection report is enclosed for your information. Also, a copy of the inspection report will be forwarded to U.S. EPA - Region V.

In order to withdraw from the hazardous waste permit system, the company should:

1. properly dispose of the old ink washwaters that are still in storage at the site, and
2. submit a Closure Plan for the hazardous waste storage area to both U.S. EPA and the Ohio EPA. The Closure Plan should be submitted 180 days prior to the commencement of closure.

Re: Union Camp Corporation
Page 2

June 28, 1982

Should you have any questions, please feel free to contact me or Kathy Homer of U.S. EPA - Region V at (312) 886-3718.

Sincerely,

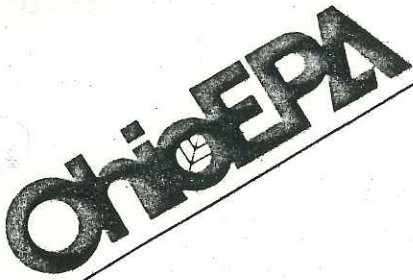
Helen Takacs

Helen Takacs
Environmental Scientist
Division of Hazardous Materials Management

HT:km

Enclosure

cc: Paula Cotter, DHMM, C.O.
Peggy Vince, HWFAB, C.O.
Kathy Homer, SIP, U.S. EPA - Region V



Re: Application Number 81-HW-0480
Cuyahoga County

September 1, 1981

James Scazzard, General Manager
Union Camp Corporation
6225 Camp Industrial Road
Solon, Ohio 44139

Dear Mr. Scazzard:

On August 21, 1981, William Skowronski of the Ohio EPA conducted an inspection of your facility, as part of the Hazardous Waste facility permit review process. Your facility was represented by F. A. Manfredonia.

Enclosed are two forms. The one titled "TREATMENT, STORAGE AND DISPOSAL FACILITY" is a copy of the form used during the inspection to evaluate your facility.

The other form, "DEFICIENCY NOTIFICATION TABLE", relates to the "TREATMENT, STORAGE AND DISPOSAL FACILITY" form and specifies what action must be taken where deficiencies were noted. A mark in column four of the "DEFICIENCY NOTIFICATION TABLE" denotes a violation of current regulations or pinpoints areas which will be covered by regulations not yet effective. The capital letter codes in column four are explained on the last page of the "DEFICIENCY NOTIFICATION TABLE".

You are hereby advised that total compliance with the regulations contained in 40 CFR 265 is required as a condition of continuing interim status with the U.S. EPA. Failure to list specific deficiencies in this communication does not relieve you from the responsibility of complying with all applicable regulations.

Very truly yours,

A handwritten signature in cursive script that reads "Paul Flanigan".

Paul Flanigan, P.E.
Hazardous Waste Materials Management

PF/bsr

cc: Kathleen Homer, U.S. EPA, Region V
William Skowronski, NEDO

CERTIFIED MAIL

RCRA INTERIM STATUS INSPECTION FORM

PART 1. GENERAL INFORMATION

U.S. EPA I.D. NO. 04D004166 336

Facility: Union Camp Corporation Address: 6225 Camp Industrial Rd City: Solon
 State: Ohio Zip Code: 44139 County: Cuyahoga Telephone: 216/248-0125
 Facility Operator: same Title: _____ Telephone: _____
 Facility Owner: Union Camp Corp. Address: 1600 Valley Road
 City: Wayne State: New Jersey Zip Code: 07470 Telephone: 201/628-7000
 Type of Ownership: ☒ Private _____ Government _____ State HWFAB No. 02-18-0480

Date of Inspection: 6/17/82 Time of Inspection: (Start) 10:00 (Finish) 11:30

Advance Notification? No ☒ Yes: _____

Weather Conditions: sunny, 70°F

INSPECTION PARTICIPANT(S)

(Name)

(Title)

(Telephone)

1. F.A. Mantedonia

Plant Mfg. Manager

216/248-0125

2. Antia Carter

Personnel Supervisor

216/248-0125

3. _____

4. _____

RCRA INTERIM STATUS INSPECTION FORM

INSPECTOR(S)

(Name)

(Title)

(Telephone)

- | | | | |
|----|---------------------|--------------------------------|---------------------|
| 1. | <u>Helen Takacs</u> | <u>Environmental Scientist</u> | <u>216/425-9171</u> |
| 2. | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ |
| 4. | _____ | _____ | _____ |

1. Type(s) of hazardous waste site activity: A. ☒ Generation B. ☒ Storage C. _____ Treatment

D. _____ Transportation E. _____ Disposal

2. Specific hazardous wastes handled at this facility (EPA HW#):

a) Listed Wastes: _____

b) Non-Listed Wastes: D001 I D002 C D003 R D000 T

D007, D008

3. Has this facility submitted a Part A Permit Application? ☒ Yes _____ No

4. Does this facility store, treat or dispose of any hazardous waste from any off-site domestic sources?

_____ Yes, See Remark # _____ ☒ No

RCRA INTERIM STATUS INSPECTION FORM

5. Does this facility store, treat or dispose of any hazardous waste from any foreign sources?
____ Yes, See Remark # ____ ☒ No
6. Does this facility transport hazardous waste materials off-site for itself or other generators?
____ Yes, Complete Part 3 (Transp.) ☒ No
- a) Applicable U.S. EPA I.D. Number _____
- b) Ohio P.U.C.O. GR TRSF Number _____
7. A brief description of site activity:

manufacture of corrugated boxes

REMARKS, PART 1. (GENERAL INFORMATION)

Plant processes have been changed such that hazardous wastes are no longer being generated. However, 14 drums of old waste material are still present in the hazardous waste storage area.

RCRA INTERIM STATUS INSPECTION FORM

PART 4. GENERAL INTERIM STATUS REQUIREMENTS

SUBPARTS INCLUDED

B: General Facility Standards
C: Preparedness and Prevention
D: Contingency and Emergency

E: Manifest/Records/Reporting
F: Ground Water Monitoring
G: Closure

H: Financial Requirements

Subpart B: General Facility Standards

	<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
1. The operator has a detailed chemical and physical analysis of the waste material containing all of the information which must be known to properly treat or store the waste as required by Sections 265.13(a)(1) and 3745-55-13-A-2.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. The operator has a written waste analysis plan which describes analytical parameters, test methods, sampling methods, testing frequency and responses to any process changes that may affect the character of the waste (Sections 265.13(b) and 3745-55-13-B).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. If required due to the actual hazards associated with the waste material, the operator has prevented unauthorized access to the active portions of the facility and has provided the following features and equipment (Sections 265.14 and 3745-55-14).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
a) 24-hour surveillance system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b) Artificial or natural barrier completely surrounding the active portion of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c) Controlled entry (gates, monitors) to the active portion of the facility at all times (265.14(2)(ii) and 3745-55-14-B-2-b).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d) "Danger-Unauthorized Personnel Keep Out" signs at each entrance to the active portion of the facility (265.14(c) and 3745-55-14-C).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

RCRA INTERIM STATUS INSPECTION FORM

	Yes	No	N/A	Remark #
4. The operator must develop and follow a comprehensive, written inspection plan and must document the inspections, malfunctions and any remedial actions taken in an operating record log which is kept for at least three years. The plan includes the following elements: (Section 265.15 and 3745-55-15)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
a) Inspect emergency equipment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b) Inspect monitoring equipment.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
c) Inspect security, alarm and communication devices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<i>inspected routinely by installer</i>
d) Inspect process equipment (pipes, pumps, etc.).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
e) Inspect containment structures (dikes, curbs, etc.).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f) Inspect facility for structural malfunctions (roof, floor, etc.).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
g) Inspect hazardous waste handling/loading areas each day used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
h) Record of any malfunctions due to equipment or operator errors.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i) Record of any hazardous waste discharges.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
5. The facility has provided a Personnel Training Program in compliance with Sections 265.16(a)(b)(c) and 3745-55-16-A-B-C including instruction in safe equipment operation and emergency response procedures, training new employees within 6 months and providing an annual training program refresher course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The facility keeps all records required by Sections 265.16(d)(e) and 3745-55-16-D-E including written job titles, job descriptions and documented employee training records.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. If required due to the actual hazards associated with Ignitable, Reactive or incompatible waste materials, the facility meets the following requirements (Sections 265.17 and 3745-55-17).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<i>wastes are not ignitable or reactive</i>

RCRA INTERIM STATUS INSPECTION FORM

	<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
a) Protection from sources of ignition.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
b) Physical separation of incompatible waste materials.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Wastes are not ignitable or reactive
c) "No Smoking" or "No Open Flames" signs near areas where Ignitable or Reactive wastes are handled.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
d) Any comingling of waste materials is done in a controlled, safe manner as prescribed by Sections 265.17(b) and 3745-55-17-B.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Subpart C: Preparedness and Prevention

- Has there been a fire, explosion or non-planned release of hazardous waste at this facility? (265.31 and 3745-55-31). ☒
- If required due to actual hazards associated with the waste material, the facility has the following equipment: (265.32 and 3745-55-32).
 - Internal alarm system. ☒
 - Access to telephone, radio or other device for summoning emergency assistance. ☒
 - Portable fire control equipment. ☒
 - Water at adequate volume and pressure via hoses sprinkler, foamers or sprayers. ☒
- All required safety, fire and communications equipment is tested and maintained as necessary; testing and maintenance are documented. (265.33 and 3745-55-33). ☒
- If required due to the actual hazards associated with the waste material, personnel have immediate access to an emergency communication device during times when hazardous waste is being physically handled (Sections 265.34 and 3745-55-34). ☒

RCRA INTERIM STATUS INSPECTION FORM

	<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
5. If required due to the actual hazards associated with the waste material, adequate aisle space to allow unobstructed movement or emergency or spill control equipment is maintained (265.35 and 3745-55-35).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. If required due to the actual hazards associated with the waste material, the facility has attempted to make appropriate arrangements with local emergency service authorities to familiarize them with the possible hazards and the facility layout (265.37(a) and 3745-55-37-A).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>1</u>
7. Where state or local emergency service authorities have declined to enter into any proposed special arrangements or agreements the refusal has been documented (265.37(b) and 3745-55-37-B).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>Subpart D: Contingency and Emergency</u>				
1. The facility has a written Contingency Plan designed to minimize hazards from fires, explosions or unplanned releases of hazardous wastes (265.51 and 3745-55-51) and contains the following components:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a) Actions to be taken by personnel in the event of an emergency incident.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Arrangements or agreements with local or state emergency authorities.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Names, addresses and telephone numbers of all persons qualified to act as emergency coordinator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) A list of all emergency equipment including location, physical description and outline of capabilities.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) If required due to the actual hazards associated with the waste(s) handled, an evacuation plan for facility personnel (Sections 265.51(f) and 3745-55-51-F).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>2</u>
2. A copy of the Contingency Plan and any plan revisions is maintained on-site and has been submitted to all Local and State emergency service authorities that might be required to participate in the execution of the plan. (Sections 265.53 and 3745-55-53).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

RCRA INTERIM STATUS INSPECTION FORM

	<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
3. The plan is revised in response to facility, equipment and personnel changes or failure of the plan (265.54 and 3745-55-54).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. An emergency coordinator is designated at all times (on-site or on-call) is familiar with all aspects of site operation and emergency procedures and has the authority to implement all aspects of the Contingency Plan (Sections 265.55 and 3745-55-55).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. If an emergency situation has occurred, the emergency coordinator has implemented all or part of the Contingency Plan and has taken all of the actions and made all of the notifications deemed necessary under Sections 265.56 and 3745-55-56.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Subpart E: Manifests/Records/Reporting

NOTE: THE FOLLOWING REQUIREMENTS ARE APPLICABLE TO BOTH ON-SITE AND OFF-SITE TREATMENT, STORAGE AND DISPOSAL FACILITIES.

	<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
1. The operator maintains a written operating record at his facility as required by Sections 265.73 and 3745-55-73 which contains the following information:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a) Description and quantity of each hazardous waste treated, stored or disposed of within the facility and the date(s) and method(s) pertinent to such treatment storage or disposal (262.73(b) (1) and 3745-55-73-8-1).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Common name, EPA Hazardous Waste Identification Number and physical state (liquid, solid, gas) of the waste(s).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) The estimated (or actual) weight, volume or density of the waste material(s).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) A description of the method(s) used to treat, store or dispose of the waste(s) using the EPA Handling Codes listed in 45 FR 33252 (May 19, 1980).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

RCRA INTERIM STATUS INSPECTION FORM

	Yes	No	N/A	Remark#
e) The present physical location of each hazardous waste within the facility.	✓	—	—	—
f) <u>FOR DISPOSAL FACILITIES</u> , the location and quantity of each hazardous waste recorded on a map of the facility and cross-references to any pertinent manifest document number(s) (265.73(b) (2) and 3745-55-73-B-2).	—	—	✓	—
g) Records of any waste analyses and trial tests required to be performed.	✓	—	—	—
h) Records of the inspections required under Sections 265.15 and 3745-55-15 (General Inspection Requirements - Subpart B).	✓	—	—	—
i) Records of any monitoring, testing or analytical data required under other Subparts as referenced by Sections 265.73(b)(6) and 3745-55-73-B-6.	✓	—	—	—
j) Records of Closure cost estimates and Post-Closure (DISPOSAL ONLY) cost estimates required under Subpart H and Section 3745-56-30, 32 and 34.	✓	—	—	—
2. The operator has submitted an annual Treatment-Storage-Disposal Operating Report (by March 1) containing all of the operating information required under Sections 265.75 and 3745-55-75.	✓	—	—	—

NOTE: THIS REPORT IS NOT THE SAME AS THE REPORT REQUIRED TO BE FILED BY GENERATORS UNDER SECTIONS 262.41 AND 3745-52-41.

3. When applicable, the operator has submitted reports on releases of hazardous wastes, fires, explosions, groundwater contamination data and facility closure (265.77 and 3745-55-77).

— — — — — ✓ — — — — —

NOTE: THE FOLLOWING REQUIREMENTS ARE APPLICABLE TO ONLY OFF-SITE TREATMENT, STORAGE AND DISPOSAL FACILITIES.

4. Manifests received by the facility are signed and dated; one copy is given to the transporter, one copy is sent to the generator within 30 days and one copy is kept for at least 3 years (Sections 265.71 and 3745-55-71).

— — — — — ✓ — — — — — *no shipments made to date*

RCRA INTERIM STATUS INSPECTION FORM

	Yes	No	N/A	Remark #
a) If shipping papers are used in lieu of manifests (bulk shipments, etc.) the same requirements are met (265.71(b) and 3745-55-71-B).	—	—	✓	—
b) Any significant discrepancies in the manifest, as defined in Sections 265.72(a) and 3745-55-72-A, are noted in writing on the manifest document (Sections 265.71(a)(2) and 3745-55-71-A-2).	—	—	✓	—
5. Any manifest discrepancies have been reconciled within 15 days as required by Sections 265.72(b) and 3745-55-72-B or the operator has submitted the required information to the Regional Administrator/Director.	—	—	✓	—
6. If the facility has accepted any unmanifested hazardous wastes from off-site sources (except from small quantity generators) for treatment, storage or disposal an unmanifested waste report containing all the information required by Sections 265.76 and 3745-55-76 has been submitted to the Regional Administrator/Director within 15 days.	—	—	✓	—

Subpart F: Groundwater Monitoring

N/A

NOTE: THESE REQUIREMENTS ARE APPLICABLE TO SURFACE IMPOUNDMENTS, LANDFILLS AND LAND TREATMENT FACILITIES ON AND AFTER NOVEMBER 19, 1981.

	Yes	No	N/A	Remark #
1. The facility has implemented one or more of the following alternatives with respect to the Groundwater Monitoring requirements in Sections 265.90(a) and 3745-55-90-A:	—	—	—	—
a) A Groundwater Monitoring System meeting the minimum requirements of Sections 265.91 and 3745-55-91 has been installed which is sampled, tested and operated in accordance with the requirements of Sections 265.92, 265.93, 265.94, 3745-55-92, -93 and -94.	—	—	—	—

RCRA INTERIM STATUS INSPECTION FORM

N/A

	Yes	No	N/A	Remark #
b) A waiver of all or part of the Groundwater Monitoring requirements has been obtained by demonstrating a low potential for the migration of hazardous wastes and constituents in accordance with the requirements of Sections 265.90(c) and 3745-55-91-C.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) An alternate Groundwater Monitoring System Plan that was first submitted to the Regional Administrator/Director was implemented and is operated and maintained in accordance with Sections 265.90(d) and 3745-55-90-D.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Subpart G: Closure and Post-Closure

NOTE: THE FOLLOWING REQUIREMENTS ARE APPLICABLE TO BOTH DISPOSAL AND NON-DISPOSAL FACILITIES:

	Yes	No	N/A	Remark #
1. A written Closure Plan is on file at the facility and contains the following elements: (Sections 265.112 and 3745-56-03)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a) A description of how and when the facility will be closed (265.112(a)(1) and 3745-56-03-A-1).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) A description of how any of the applicable closure requirements in other Subparts of Sections 265 and 3745-55, -56, -57, -58 (Tanks, Surface Impoundments, Landfills, etc.) will be carried out.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) An estimate of the maximum amount of hazardous wastes being treated or in storage at the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) A description of steps taken to decontaminate facility equipment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) The year closure is expected to begin and a list of dates over which the various phases of closure are expected to be completed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. The Closure Plan has been amended within 60 days in response to any changes in facility design, processes or closure dates.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

RCRA INTERIM STATUS INSPECTION FORM

	<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
3. The Closure Plan has been submitted to the Regional Administrator/Director 180 days prior to beginning the Closure process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>3</u>
4. If Closure has been completed, the facility was closed in a manner which minimizes any future problems in compliance with the Closure performance standard in Sections 265.111 and 3745-56-02.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a) The facility has been closed within the time limits specified in Sections 265.113 and 3745-56-04.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b) Upon completion of Closure all facility equipment and structures were decontaminated and any hazardous residues were properly disposed of (265.114 and 3745-56-05).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c) Completion of Closure has been certified to the Regional Administrator by the Owner/Operator and an independent Professional Engineer (265.115 and 3745-56-06).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
 NOTE: THE FOLLOWING REQUIREMENTS ARE APPLICABLE TO <u>ONLY</u> DISPOSAL FACILITIES.				
5. A written Post-Closure Plan is on file at the facility which describes all Post-Closure activities and addresses all of the plan elements required by Sections 265.118(a) and 3745-56-08-A.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. The Post-Closure Plan has been amended within 60 days in response to any changes in facility design or operation.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. The Post-Closure Plan has been submitted to the Regional Administrator/Director 180 days prior to beginning Closure.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. The Owner/Operator has submitted all of the information on prior use of the property required in Sections 265.119 and 3745-56-10 to the Local Land Authority within 90 days after Closure is completed.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

RCRA INTERIM STATUS INSPECTION FORM

Yes No N/A Remark #

9. The property owner has attached a notation to the property deed or other instrument which will notify any potential purchaser that the property has been used to manage hazardous waste and future use of the property is restricted under Sections 265.117(c) and 3745-56-08-C as required in Sections 265.120 and 3745-56-10. ✓

Subpart H: Financial Requirements

1. A written cost estimate for Closure of the facility (by the methods and procedures specified in the facility Closure Plan) is available for review on and after May 19, 1981 (Sections 265.142 and 3745-56-32). ✓

NOTE: REGULATIONS PROMULGATED IN 46 FR 2877-2892 IN REGARD TO FINANCIAL REQUIREMENTS HAVE BEEN STAYED UNTIL OCTOBER 13, 1981 AND MAY BE AMENDED OR REPROPOSED AT THAT TIME.

REMARKS, PART 4. GENERAL INTERIM STATUS REQUIREMENTS

- 1,2. Hazardous wastes are of a relatively small quantity and are neither ignitable or reactive
3. Although the entity wishes to close its storage area, the closure Plan has not been submitted. Closure has not yet begun.

RCRA INTERIM STATUS INSPECTION FORM

PART 5. TREATMENT/STORAGE/DISPOSAL

SUBPARTS INCLUDED

I: Management of Containers	L: Waste Piles	0: Incinerators
J: Management of Tanks	M: Land Treatment	P: Thermal Treatment
K: Surface Impoundments	N: Landfills	Q: Chemical/Physical/Biological Treatment

Subpart I: Management of Containers

	<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
1. Hazardous wastes are stored in closed containers which are in good physical condition and are compatible with the wastes stored in them (Sections 265.171, .172, .173 and 3745-56-51, -52-53).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. The area where containers are stored is inspected for evidence of leaks or corrosion at least weekly and such inspections are documented (265.174 and 3745-56-54).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

NOTE: FACILITIES OPTING FOR LONG TERM STORAGE ARE NOT REQUIRED TO MEET PRE-TRANSPORT LABELING REQUIREMENTS UNTIL THE CONTAINERS ARE ACTUALLY OFFERED FOR TRANSPORT AND ARE NOT REQUIRED TO AFFIX AN ACCUMULATION DATE. (SECTIONS 262 AND 3745-52)

	<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
3. Containers holding Ignitable or Reactive waste(s) are located at least 50 feet (15 Meters) from the property line and the general requirements for handling such wastes in Sections 265.17 and 3745-55-17-B (physical separation, signs and safety) are met (265.176 and 3745-56).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<i>wastes are not ignitable or reactive</i>
4. Incompatible waste materials are not placed in the same containers or put in contaminated containers unless it is done under completely controlled and safe conditions as specified in Sections 265.17(b) and 3745-55-17-B (Sections 265.177(a), (b) and 3745-56-57-A-B).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<i>no incompatible wastes at site</i>

RCRA INTERIM STATUS INSPECTION FORM

Yes No N/A Remark #

5. Containers holding hazardous wastes are never stored near other materials which may interact with the waste in a hazardous manner (Sections 265.177 (C) and 3745-56-57-C).

☒ ☐ ☐

STATE IDENTIFICATION NUMBER

83-HW- 0480

EPA IDENTIFICATION NUMBER

? OH D004166336

TREATMENT, STORAGE, AND DISPOSAL FACILITIES
Form A.- General Facility Standards

I. General Information:

- (J) Facility Name: UNION CAMP CORP.
- (J) Street: 6225 CAMP INDUSTRIAL ROAD
- (J) City: OLON (D) State: OH (E) Zip Code: 44139
- (J) Phone: 216-248-0125 (G) County: CUYAHOGA
- (J) Operator: SAME
- (J) Street: _____
- (J) City: _____ (K) State: _____ (L) Zip Code: _____
- (J) Phone: _____ (N) County: _____
- (J) Owner: UNION CAMP CORP.
- (J) Street: 1600 VALLEY ROAD
- (J) City: WAYNE (R) State: NJ (S) Zip Code: 07470
- (J) Phone: 201-628-9000 (U) County: _____
- (J) Date of Inspection: 8-21-81 (W) Time of Inspection (From) 10:00 AM (To) _____
- (J) Weather Conditions: SUNNY - 75°F

Part A

Sub

ISS

CONTAINERS

(Y)	Person(s) Interviewed	Title	Telephone
	<u>F. A. MANFREDONIA</u>	<u>PLT. MFG. MGR</u>	<u>216-248-0125</u>
	<u>ANITA CARTER</u>	<u>PERSONNEL MGR</u>	<u>"</u>

(Z)	Inspection Participants	Agency/Title	Telephone
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

(AA)	Preparer Information		
	Name	Agency/Title	Telephone
	<u>WM SKOWRONSKI</u>	<u>DISTRICT ENGINEER</u>	<u>216-425-9171</u>

II. SITE ACTIVITY:

Complete sections I through VII for all treatment, storage, and/or disposal facilities. Complete the forms (in parenthesis) in section VIII corresponding to the site activities identified below:

- | | |
|---|--|
| <p><u> </u> A. Storage and/or Treatment</p> <p> <u> </u> 1. Containers (I)</p> <p> <u> </u> 2. Tanks (J)</p> <p> <u> </u> 3. Surface Impoundments (K)</p> <p> <u> </u> 4. Waste Piles (L)</p> <p><u> </u> B. Land Treatment (M)</p> <p><u> </u> C. Landfills (N)</p> | <p><u> </u> D. Incineration and/or Thermal Treatment (O and P)</p> <p><u> </u> E. Chemical, Physical, and Biological Treatment (Q)</p> |
|---|--|

Note: If facility is also a generator or transporter of hazardous waste complete sections IX and X of this form as appropriate.

III. GENERAL FACILITY STANDARDS:
(Part 265 Subpart B)

	Yes	No	NI*	Remark
(A) Has the Regional Administrator been notified regarding:				
1. Receipt of hazardous waste from a foreign source?				N/A
2. Facility expansion?				N/A
(B) General Waste Analysis: <u>NO PLAN ON SITE</u>				SEE REMARK #1
1. Has the owner or operator obtained a detailed chemical and physical analysis of the waste?		✓		BUT RAW INK CONTAIN SIGNIFICANT AMOUNTS OF Cr & Pb.
2. Does the owner or operator have a detailed waste analysis plan on file at the facility?		✓		11
3. Does the waste analysis plan specify procedures for inspection and analysis of each movement of hazardous waste from off-site?		✓		11
(C) Security - Do security measures include: (if applicable)				
1. 24-Hour surveillance?	✓			
2. Artificial or natural barrier around facility?	✓			
3. Controlled entry?	✓			
4. Danger sign(s) at entrance?	✓			
(D) Do Owner or Operator Inspections Include:				HAVE INSPECTION FORM & DO WEEKLY INSPECTIONS.
1. Records of malfunctions?	✓			
2. Records of operator error?	✓			
3. Records of discharges?	✓			

II. GENERAL FACILITY STANDARDS - Continued

	Yes	No	NI*	Remarks
4. Inspection schedule?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Safety, emergency equipment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ABSORBMENT
6. Security devices?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N/A
7. Operating and structural devices?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A
8. Inspection log?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(E) Do personnel training records include: (Effective 5/19/81)				
1. Job titles?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Job descriptions?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Description of training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Records of training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Have facility personnel received required training by 5-19-81?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Do new personnel receive required training within six months?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(F) If required are the following special requirements for ignitable, reactive, or incompatible wastes addressed?				
1. Special handling?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A
2. No smoking signs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Separation and protection from ignition sources?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

*Not Inspected

IV. PREPAREDNESS AND PREVENTION:
(Part 265 Subpart C)

A) Maintenance and Operation of Facility:

Is there any evidence of fire, explosion, or release of hazardous waste or hazardous waste constituent?

Yes No NI* Remarks

_____ ✓ _____

B) If required, does the facility have the following equipment:

1. Internal communications or alarm systems?

✓ _____

2. Telephone or 2-way radios at the scene of operations?

✓ _____

3. Portable fire extinguishers, fire control, spill control equipment and decontamination equipment?

✓ _____

ABSORBENT

Indicate the volume of water and/or foam available for fire control:

C) Testing and Maintenance of Emergency Equipment:

1. Has the owner or operator established testing and maintenance procedures for emergency equipment?

✓ _____

ABSORBENT VOLUME CHECK WEEKLY

2. Is emergency equipment maintained in operable conditions?

✓ _____

D) Has owner or operator provided immediate access to internal alarms? (if needed)

✓ _____

(E) Is there adequate aisle space
for unobstructed movement?

✓

V. CONTINGENCY PLAN AND EMERGENCY PROCEDURES:
(Part 265 Subpart D)

(A) Does the Contingency Plan contain the
following information:

Yes No NI* Remarks

1. The actions facility personnel
must take to comply with
§265.51 and 265.56 in response
to fires, explosions, or any
unplanned release of hazardous
waste? (If the owner has a Spill
Prevention, Control, and Counter-
measures (SPCC) Plan, he needs
only to amend that plan to
incorporate hazardous waste
management provisions that are
sufficient to comply with the
requirements of this Part (as
applicable.)

** NO CONTINGENCY PLAN
AVAILABLE YET SEE REMARK #*

2. Arrangements agreed by local
police departments, fire departments
hospitals, contractors, and State
and local emergency response teams
to coordinate emergency services
pursuant to §265.37?

N/A

3. Names, addresses, and phone
numbers (office and home) of all
persons qualified to act as
emergency coordinators?

[scribble]

X

4. A list of all emergency equipment
at the facility which includes the
location and physical description
of each item on the list and a
brief outline of its capabilities?

X

5. An evacuation plan for facility
personnel where there is a possibility
that evacuation could be necessary?
(This plan must describe signal(s)
to be used to begin evacuation,
evacuation routes, and alternate
evacuation routes?)

N/A

*Not Inspected

V. CONTINGENCY PLAN AND EMERGENCY PROCEDURES - Continued

	Yes	No	NI*	Remarks
(B) Are copies of the Contingency Plan available at site and local emergency organizations?	_____	_____	_____	N/A
(C) Emergency Coordinator				
1. Is the facility Emergency Coordinator identified?	_____	_____	_____	* SEE V. A. 1
2. Is coordinator familiar with all aspects of site operation and emergency procedures?	_____	_____	_____	11
3. Does the Emergency Coordinator have the authority to carry out the Contingency Plan?	_____	_____	_____	11
(D) Emergency Procedures				
If an emergency situation has occurred at this facility, has the Emergency Coordinator followed the emergency procedures listed in 265.56?	_____	_____	_____	NOT EXPERIENCED EMERGENCY YET.

VI. MANIFEST SYSTEM, RECORDKEEPING, AND REPORTING (Part 265 Subpart E)

	Yes	No	NI*	Remarks
(A) Use of Manifest System				NO MANIFEST AVAILABLE ON SITE.
1. Does the facility follow the procedures listed in §265.71 for processing each manifest?	_____	_____	_____	SEE ↑
2. Are records of past shipments retained for 3 years?	_____	_____	_____	SEE ↑
(B) Does the owner or operator meet requirements regarding manifest discrepancies?	_____	_____	_____	SEE ↑

(C) Operating Record

1. Does the owner or operator maintain an operating record as required in 265.73?

✓

2. Does the operating record contain the following information:

**b. The method(s) and date(s) of each waste's treatment, storage, or disposal as required in Appendix I?

N/A

c. The location and quantity of each hazardous waste within the facility?

✓

***d. A map or diagram of each cell or disposal area showing the location and quantity of each hazardous waste? (This information should be cross-referenced to specific manifest number, if waste was accompanied by a manifest.)

N/A

e. Records and results of all waste analyses, trial tests, monitoring data, and operator inspections?

✓

HOWEVER NO ANALYSIS
PRESENTLY DONE
SEE REMARK #1

f. Reports detailing all incidents that required implementation of the Contingency Plan?

✓

g. All closure and post closure costs as applicable? (Effective 5-19-81)

✓

** See page 33252 of the May 19, 1980, Federal Register.

*** Only applies to disposal facilities

VII. CLOSURE AND POST CLOSURE
(Part 265 Subpart G)

Yes No NI* Remarks

Closure and Post Closure

- | | | | | |
|---|-------------------------------------|-------------------------------------|--------------------------|------------------------|
| 1. Is the facility closure plan available for inspection by May 19, 1981? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 2. Has this plan been submitted to the Regional Administrator | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | NO CLOSURE ANTICIPATED |
| 3. Has closure begun? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 4. Is closure estimate available by May 19, 1981? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

Post closure care and use of property

- | | | | | |
|--|--------------------------|-------------------------------------|--------------------------|------------------------|
| Has the owner or operator supplied a post closure monitoring plan? (effective by May 19, 1981) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | NO CLOSURE ANTICIPATED |
|--|--------------------------|-------------------------------------|--------------------------|------------------------|

VIII. FACILITY STANDARDS
(Part 265, Subparts I thru R)

I
USE AND MANAGEMENT OF CONTAINERS

12 DRUMS PRESENTLY

ility Name: _____ Date of Inspection: _____

Yes No NI* Remarks

- | | | | | |
|---|-------------------------------------|--------------------------|--------------------------|-----|
| 1. Are containers in good condition? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 2. Are containers compatible with waste in them? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 3. Are containers stored closed? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 4. Are containers managed to prevent leaks? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 5. Are containers inspected weekly for leaks and defects? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 6. Are ignitable & reactive wastes stored at least 15 meters (50 feet) from the facility property line? (Indicate if waste is ignitable or reactive.) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | N/A |

Yes No NI* Remarks

7. Are incompatible wastes stored in separate containers? (If not, the provisions of 40 CFR 265.17(b) apply.)

N/A

8. Are containers of incompatible waste separated or protected from each other by physical barriers or sufficient distance?

N/A

J
TANKS

Facility Name: _____

Date of Inspection: _____

1. Are tanks used to store only those wastes which will not cause corrosion, leakage or premature failure of the tank?

2. Do uncovered tanks have at least 60 cm (2 feet) of freeboard, or dikes or other containment structures?

3. Do continuous feed systems have a waste-feed cutoff?

4. Are waste analyses done before the tanks are used to store a substantially different waste than before?

5. Are required daily and weekly inspections done?

6. Are reactive & ignitable wastes in tanks protected or rendered non-reactive or non-ignitable? Indicate if waste is ignitable or reactive. (If waste is rendered non-reactive or non-ignitable, see treatment requirements.)

7. Are incompatible wastes stored in separate tanks? (If not, the provisions of 40 CFR 265.17(b) apply.)

Yes No NI* Remarks

8. Has the owner or operator observed the National Fire Protection Association's buffer zone requirements for tanks containing ignitable or reactive wastes?

Tank capacity: _____ gallons

Tank diameter: _____ feet

Distance of tank from property line _____ feet

(See table 2 - 1 through 2 - 6 of NFPA's "Flammable and Combustible Liquids Code - 1977" to determine compliance.)

K SURFACE IMPOUNDMENTS

Facility Name: _____

Date of Inspection: _____

1. Do surface impoundments have at least 60 cm (2 feet) of freeboard?

2. Do earthen dikes have protective covers?

3. Are waste analyses done when the impoundment is used to store a substantially different waste than before?

4. Is the freeboard level inspected at least daily?

5. Are the dikes inspected weekly for evidence of leaks or deterioration?

6. Are reactive & ignitable wastes rendered non-reactive or non-ignitable before storage in a surface impoundment? (If waste is rendered non-reactive or non-ignitable, see treatment requirements.)

7. Are incompatible wastes stored in different impoundments? (If not, the provisions of 40 CFR 265.17(b) apply.)

WASTE PILES

Facility Name: _____

Date of Inspection: _____

	Yes	No	NI*	Remarks
1. Are waste piles covered or protected from dispersal by wind?	_____	_____	_____	_____
2. Is each in-coming movement of waste analyzed before being added to the waste pile?	_____	_____	_____	_____
3. Are leachate, run-off, and run-on controlled as per the requirements of 265.258? (The effective date of this provision is Nov. 19, 1981.)	_____	_____	_____	_____
4. Are reactive & ignitable wastes rendered non-reactive or non-ignitable before storage in a pile? Indicate if waste is ignitable or reactive. (If waste is rendered non-reactive or non-ignitable, see treatment requirements.)	_____	_____	_____	_____
5. Are piles of reactive or ignitable waste protected from materials or conditions that might cause them to ignite or react?	_____	_____	_____	_____
6. Are incompatible wastes stored in different piles? (If not, the provisions of 40 CFR 265.17(b) apply.)	_____	_____	_____	_____
7. Are piles of incompatible waste protected by barriers or distance from other waste?	_____	_____	_____	_____

*Not Inspected

LAND TREATMENT

Facility Name: _____

Date of Inspection: _____

1. Is treated hazardous waste capable of biological or chemical degradation?

2. Are run-off and run-on diverted from the facility or collected? (Effective date: November 19, 1981)?

3. Is waste analyzed according to 265.273?

4. If food chain crops are grown at the facility, has the owner or operator addressed the requirements of 265.276?

5. Is an unsaturated zone monitoring plan designed and implemented to detect the vertical migration of hazardous waste and provide information on the background concentrations of the hazardous waste available?

6. Does the unsaturated zone monitoring plan address the minimum information specified in 265.278?

7. Are records kept regarding application dates and rates, quantities, and locations, of all hazardous waste placed in the facility?

8. Are the special requirements fulfilled regarding land treatment of ignitable or reactive wastes? (Indicate if waste is ignitable or reactive.)

9. Are incompatible wastes land treated? (If yes, 265.17(b) applies)

N
LANDFILLS

Facility Name: _____ Date of Inspection: _____

Yes No NI* Remarks

(A) General Operating Requirements
Does the facility provide the following:

- | | | | | |
|---|-------|-------|-------|-------|
| **1. Diversion of run-on away from active portions of the fill? | _____ | _____ | _____ | _____ |
| **2. Collection of run-off from active portions of the fill? | _____ | _____ | _____ | _____ |
| **3. Is collected run off treated? | _____ | _____ | _____ | _____ |
| 4. Control of wind dispersal of hazardous waste? | _____ | _____ | _____ | _____ |

(**Effective 11-19-81)

(B) Surveying and Recordkeeping
Does the Operating Record Include:

- | | | | | |
|--|-------|-------|-------|-------|
| 1. A map showing the exact location and dimensions of each cell? | _____ | _____ | _____ | _____ |
| 2. The contents of each cell and the location of each hazardous waste type within each cell? | _____ | _____ | _____ | _____ |

(C) Closure and Post-Closure

- | | | | | |
|--|-------|-------|-------|-------|
| 1. Is the Closure Plan available for inspection by 5-19-81? | _____ | _____ | _____ | _____ |
| 2. Has this plan been submitted to the Regional Administrator? | _____ | _____ | _____ | _____ |
| 3. Has closure begun? | _____ | _____ | _____ | _____ |
| 4. Is closure cost estimate available by 5-19-81? | _____ | _____ | _____ | _____ |

(D) Special requirements for ignitable or reactive waste

Are ignitable or reactive waste treated so the resulting mixture is no longer ignitable or reactive? _____

Yes No NI* Remarks

(If waste is rendered non-reactive or non-ignitable see treatment requirements)

If not, the provisions of 40 CFR 265.17(b) apply.

Special Requirements for Incompatible Wastes.

Does the owner or operator dispose of incompatible wastes in separate cells?

If not, the provisions of 40 CFR 265.17(b) apply.

Special requirements for liquid waste (effective 11-19-81)

1. Are bulk or non-containerized liquids placed in the landfill?

2. Does the landfill have a chemically and physically resistant liner system?

3. Does the landfill have a functional leachate collection system?

4. Are free liquids stabilized prior to or immediately after placement in the landfill?

Special requirements for Containers (effective 11-19-81)

Are empty containers crushed flat, shredded, or similarly reduced in volume before being buried beneath the surface the landfill?

O and P
INCINERATION and THERMAL TREATMENT

(A) Facility Name: _____

(B) Date of Inspection: _____

I. Determination of Steady State

A. Type of unit (i.e., type of incinerator or thermal treatment): _____

B. Components and steady state condition:

**** Was this component at SS prior to adding waste?

	Component	Yes	No	NI*	Remarks
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____

II. Waste Analysis

A. Minimum requirements, for wastes not previously burned/treated.

	Required analyses; has an analysis been performed for the following?	Yes	No	NI*	Remarks
a.	Heating value	_____	_____	_____	_____
b.	Halogen content	_____	_____	_____	_____
c.	Sulfur content	_____	_____	_____	_____

Yes No NI* Re ks

2. Has documented or written data been substituted for analysis of either:

a. Lead?

b. Mercury?

List other parameters for which the waste is tested to enable owner or operator to establish steady state or determine the types of pollutants which may be emitted. (Note in Remarks any which you feel should be tested.)

Remarks

1. _____
2. _____
3. _____
4. _____
5. _____

- _____
- _____
- _____
- _____
- _____

III. Monitoring and Inspections

Yes No NI* Remarks

Are combustion/emission control instruments monitored at least every 15 minutes?

Is steady state maintained or corrections attempted?

Is stack plume observed at least hourly for normal color and opacity?

Did any stack observations made by owner or operator show a plume different than normal?**

If yes to D above, were corrections made to return emissions to normal appearance?**

Are the complete unit and associated equipment inspected daily for leaks, spills, and fugitive emissions?

Are emergency shutdown controls and system alarms checked daily for proper operation?

Inspected

Specify in Remarks for what period of time this was checked.

IV. Open Burning

A. Only complete this part if the facility open burns hazardous waste.

	Yes	No	NI*	Remarks
1. Does this facility burn <u>only</u> waste explosives? (A <u>No</u> answer means <u>other</u> hazardous waste is open-burned.)				
2. If this facility open-burns waste explosives, does it burn the waste at a distance greater than or equal to the minimum specified distance (below)				

Pounds of waste explosives or propellants	Minimum distance from open burning or detonation to the property of others		
0 to 100.....	204 m	670	ft
101 to 1,000.....	380 m	1,250	ft
1,001 to 10,000.....	530 m	1,730	ft
10,001 to 30,000.....	690 m	2,260	ft

Q

CHEMICAL, PHYSICAL and BIOLOGICAL TREATMENT

Facility Name: _____

Date of Inspection: _____

	Yes	No	NI*	Remarks
1. Is equipment used to treat only those wastes which will not cause leakage, corrosion, or premature failure?				
2. Is a continuously fed system equipped with a means of hazardous waste inflow stoppage or control (e.g., cut-off system?)				

	Yes	No	NI*	Remarks
3. Has the owner or operator addressed the waste analysis requirements of 265.402?	_____	_____	_____	_____
4. Are inspection procedures followed according to 265.403?	_____	_____	_____	_____
5. Are the special requirements fulfilled for ignitable or reactive wastes?	_____	_____	_____	_____
6. Are incompatible wastes treated? (If yes, 265.17(b) applies.)	_____	_____	_____	_____

Note: EPA has temporarily suspended the applicability of the requirements of the hazardous waste regulations in 40 CFR Parts 122, 264 and 265 to owners and operators of (1) wastewater treatment tanks that receive, store, and treat wastewaters that are hazardous waste or that generate, store or treat a wastewater treatment sludge which is a hazardous waste where such wastewaters are subject to regulation under Sections 402 or 307(b) of the Clean Water Act (33 U.S.C. 1251 et seq.) and (2) neutralization tanks, transport vehicles, vessels, or containers which neutralize wastes which are hazardous only because they exhibit the corrosivity characteristic under 40 CFR §261. or are listed as hazardous wastes in Subpart D of 40 CFR Part 261 only for this reason.

IX

Complete this section if the owner or operator of a TSD facility also generates hazardous waste that is subsequently shipped off-site for treatment, storage, or disposal.

1. MANIFEST REQUIREMENTS

	Yes	No	NI*	Remarks
A) Does the operator have copies of the manifest available for review?	_____	_____ <input checked="" type="checkbox"/>	_____	SEE REMARK #1
B) Do the manifest forms reviewed contain the following information: (If possible, make copies of, or record information from, manifest(s) that do not contain the critical elements)				
1. Manifest document number?	_____	_____	_____	SEE IX.1.A
2. Name; mailing address, telephone number, and EPA ID Number of Generator	_____	_____	_____	_____

Yes No NI* Remarks

3. Name and EPA ID Number of Transporter(s)?

SEE IX.1.A

4. Name, address, and EPA ID Number of Designated permitted facility and alternate facility?

5. The description of the waste(s) (DOT shipping name, DOT hazard class, DOT identification number)?

6. The total quantity of waste(s) and the type and number of containers loaded?

7. Required certification?

8. Required signatures?

(C) Does the owner or operator submit exception reports when needed?

2. PRE-TRANSPORT REQUIREMENTS

(A) Is waste packaged in accordance with DOT Regulations? (Required prior to movement of hazardous waste off-site)

SEE IX.1.A & REMIT

(B) Are waste packages marked and labeled in accordance with DOT regulations concerning hazardous waste materials? (Required to movement of hazardous waste off-site)

(C) If required, are placards available to transporters of hazardous waste?

Omit Section 3 if the facility has interim status and its Part A permit application describes storage

3. On Site Accumulation

	Yes	No	NI*	Remarks
1. Are containers marked with start of accumulation date?	_____	_____	_____	_____
2. Are the containers of hazardous waste removed from installation before they can accumulate for more than 90 days?	_____	_____	_____	_____
3. Are wastes stored in containers managed in accordance with 40 CFR Part 265.174 and 265.175 (weekly inspections of containers, containers holding ignitable or reactive wastes located at least 15 meters (50 Feet) from facility's property line?	_____	_____	_____	_____
4. If wastes are stored in tanks, are the tanks managed according to the following requirements?				
a. Are tanks used to store only those wastes which will not cause corrosion leakage or premature failure of the tank?	_____	_____	_____	_____
b. Do uncovered tanks have at least 60 cm (2 feet) of freeboard, dikes, or other containment structures?	_____	_____	_____	_____
c. Do continuous feed systems have a waste-feed cutoff?	_____	_____	_____	_____
d. Are required daily and weekly inspections done?	_____	_____	_____	_____
e. Are reactive & ignitable wastes in tanks protected or rendered non-reactive or non-ignitable? (If waste is rendered non-reactive or non-ignitable, see treatment requirements?	_____	_____	_____	_____
f. Are incompatible wastes stored in separate tanks? (If not, the provisions of 40 CFR §265.17(b) apply)	_____	_____	_____	_____

VI. RECORDKEEPING and REPORTING
(Part 262, Subpart D)

	Yes	No	NI*	Remarks
(A) Are Manifests, Annual Reports, Exception Reports, and all test results and analyses retained for at least three years?	_____	_____	_____	SEE IX.1-A REMARK #
(B) Has the generator submitted Annual Reports and Exception Reports as required?	_____	_____	_____	" "

VII. INTERNATIONAL SHIPMENTS
(Part 262, Subpart E)

Has the installation imported or exported Hazardous Waste?

N/A

(If answered Yes, complete the following as applicable.)

1. Exporting Hazardous waste, has a generator:
 - a. Notified the Administrator in writing? _____
 - b. Obtained the signature of the foreign consignee confirming delivery of the waste(s) in the foreign country? _____
 - c. Met the Manifest requirements? _____
2. Importing Hazardous Waste, has the generator:

Met the manifest requirements? _____

X
TRANSPORTER REQUIREMENTS
40 CFR Part 263

Complete this Section if the owner or operator transports hazardous waste.

I. MANIFEST SYSTEM AND RECORDKEEPING
(Subpart B)

n/a

- Yes No NI* Remarks

Are copies of the completed manifests or shipping paper(s) available for review and retained for three years?

II. INTERNATIONAL SHIPMENTS

n/a

A. Does the transporter record on the manifest the date the waste left the U.S.?

B. Are signed completed manifest(s) on file?

V. MISCELLANEOUS

n/a

A. Does transporter transport hazardous waste into the U.S. from abroad?

B. Does the transporter mix hazardous waste of different DOT shipping descriptions by placing them into a single container?

NOTE: If (A) or (B) were answered "Yes" then the Transporter is also a Generator and must comply with the Generator regulations.

Not Inspected

REMARKS

Use this section to briefly describe site activities observed at the time of the inspection. Note any possible violations of Interim Status Standards.

1. THIS FACILITY USES PRINTING INK IN THE MANUFACTURING OF CORRUGATED CONTAINERS. THE PRINTING EQUIPMENT IS WASHED BETWEEN RUNS AND ^{IS} DISCHARGED TO THE MUNICIPAL SANITARY SEWERAGE SYSTEM IN VERY DILUTE CONCENTRATION. THE COMPANY'S CORPORATE POSTURE IS TO COVER THEMSELVES IN CASE THE CITY PROHIBITS DISCHARGE TO THEM AT SOME TIME IN THE FUTURE. PRESENTLY THEY STORE 12 BARRELS OF WASH WATER ~~ON~~ ^{ON} WHICH NO ANALYSIS HAS BEEN DONE. THUS WE'RE NOT EVEN SURE THE BARRELS CONTAIN A HAZARDOUS ~~MATERIAL~~ ^{WASTE}. I TOLD THE COMPANY TO OBTAIN AN ANALYSIS AND A NUMBER OF OTHER OBVIOUS DEFICIENCIES.

{ IN BRIEF, I CAN'T IMAGINE THE ~~CIRCUMSTANCES~~ ^{CIRCUMSTANCES} WOULD OCCUR THAT WOULD REQUIRE THE ENTITY TO STORE H.W. ON THEIR SITE. HOWEVER THE CORPORATE OFFICE WOULD LIKE A STORAGE PERMIT TO BE SAFE.

EPA
ENVIRONMENTAL PROTECTION AGENCY
GENERAL INFORMATION
Consolidated Permits Program
(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER
E 04D 004166336

II. POLLUTANT CHARACTERISTICS

PLEASE PLACE LABEL IN THIS SPACE

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK 'X'			SPECIFIC QUESTIONS	MARK 'X'		
	YES	NO	FORM ATTACHED		YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous waste? (FORM 3)	X		X	F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY
1 SKIP UNION CAMP CORPORATION

IV. FACILITY CONTACT
A. NAME & TITLE (last, first, & title)
2 SCAZZARO JAMES GENERAL MANAGER
B. PHONE (area code & no.)
216 248 0125

V. FACILITY MAILING ADDRESS
A. STREET OR P.O. BOX
3 6225 CAMP INDUSTRIAL ROAD
B. CITY OR TOWN
4 SOLON
C. STATE
OH
D. ZIP CODE
44139

VI. FACILITY LOCATION
A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER
5 6225 CAMP INDUSTRIAL ROAD
B. COUNTY NAME
6 CUYAHOGA
C. CITY OR TOWN
6 SOLON
D. STATE
OH
E. ZIP CODE
44139
F. COUNTY CODE (if known)
035

CONTINUED FROM THE FRONT

II. SIC CODES (4-digit, in order of priority)

A. FIRST				B. SECOND			
2	6	5	3	(specify)	7		(specify)
Paper Converting							
C. THIRD				D. FOURTH			
				(specify)	7		(specify)

III. OPERATOR INFORMATION

A. NAME						B. Is the name listed in item VIII-A also the owner?	
UNION CAMP CORPORATION						<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
						66	

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)				D. PHONE (area code & no.)			
F = FEDERAL	M = PUBLIC (other than federal or state)	P	(specify)	2	9	1	6
S = STATE	O = OTHER (specify)			6	2	8	9
P = PRIVATE				0	0	0	0

E. STREET OR P.O. BOX			
608 VALLEY ROAD			

F. CITY OR TOWN				G. STATE	H. ZIP CODE	IX. INDIAN LAND	
WAYNE				N J	07470	Is the facility located on Indian lands?	
						<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)				D. PSD (Air Emissions from Proposed Sources)			
N				9	P		
B. UIC (Underground Injection of Fluids)				E. OTHER (specify)			
C. RCRA (Hazardous Wastes)				E. OTHER (specify)			

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

Manufacturer of Corrugated Paperboard Packaging

F9 A/S1

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)		B. SIGNATURE		C. DATE SIGNED	
J. H. Neale Vice President & General Manager		<i>J. H. Neale</i>		11/7/80	

COMMENTS FOR OFFICIAL USE ONLY

C	
C	

Please print or type in the unshaded areas only
(fill-in areas are spaced for elite type, i.e., 12 characters/inch).

Form Approved OMB No. 158-S80004

FORM 1
HAZARDOUS WASTE PERMIT APPLICATION
Consolidated Permits Program
(This information is required under Section 3005 of RCRA.)

1. EPA I.D. NUMBER
FOAD 88416653631

FOR OFFICIAL USE ONLY
APPLICATION PROVED
DATE RECEIVED (yr., mo., & day)
23 24 25 26 27 28 29 30

COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION (place an "X" below and provide the appropriate date)
☒ 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)
71
C. 8 YR. 80 MO. 10 DAY 24
FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)
72 73 74 75 76 77 78
☐ 2. NEW FACILITY (Complete item below.)
71
FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN
72 73 74 75 76 77 78
B. REVISED APPLICATION (place an "X" below and complete item I above)
☐ 1. FACILITY HAS INTERIM STATUS
72
☐ 2. FACILITY HAS A RCRA PERMIT
72

III. PROCESSES - CODES AND DESIGN CAPACITIES

A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

B. PROCESS DESIGN CAPACITY - For each code entered in column A enter the capacity of the process.
1. AMOUNT - Enter the amount.
2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:			Treatment:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY
TANK	S02	GALLONS OR LITERS		T02	GALLONS PER DAY OR LITERS PER DAY
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS	SURFACE IMPOUNDMENT	T03	TONS PER HOUR OR METRIC TONS PER HOUR
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS	INCINERATOR	T04	GALLONS PER DAY OR LITERS PER DAY
Disposal:			OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)		
INJECTION WELL	D79	GALLONS OR LITERS			
LANDFILL	D00	ACRE-Feet (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER			
LAND APPLICATION	D81	ACRES OR HECTARES			
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY			
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS			
UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE CODE
GALLONS	G	LITERS PER DAY	ACRE-Feet	A	
LITERS	L	TONS PER HOUR	HECTARE-METER	F	
CUBIC YARDS	Y	METRIC TONS PER HOUR	ACRES	B	
CUBIC METERS	C	GALLONS PER HOUR	HECTARES	Q	
GALLONS PER DAY	U	LITERS PER HOUR			

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

S
C
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

DUP

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY	FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY	FOR OFFICIAL USE ONLY
		1. AMOUNT (specify)				1. AMOUNT	
		2. UNIT OF MEASURE (enter code)				2. UNIT OF MEASURE (enter code)	
X-1	S 0 2	600		5			
X-2	T 0 3	20		6			
1	S 0 1	100,000 000		7			
2				8			
3				9			
4				10			

II. PROCESSES (continued)

SPACE FOR ADDITIONAL PROCESS CODES
INCLUDE DESIGN CAPACITY.

FOR DESCRIBING OTHER PROCESSES (code "0")

). FOR EACH PROCESS ENTERED HERE

V. DESCRIPTION OF HAZARDOUS WASTES

EPA HAZARDOUS WASTE NUMBER - Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

ESTIMATED ANNUAL QUANTITY - For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

UNIT OF MEASURE - For each quantity entered in column B enter the unit of measure used. Units of measure which must be used and the appropriate abbreviations are:

POUNDS P
KILOGRAMS K
GALLONS G
LITERS L

HAZARDOUS WASTE NUMBER CODE
HAZARDOUS WASTE NUMBER CODE
HAZARDOUS WASTE NUMBER CODE

If it is necessary to use any other unit of measure for quantity, the unit of measure must be converted into one of the required units of measure taking into account the absorption capacity or specific gravity of the waste.

I. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER - Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) - A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARDOUS WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

Continued from page 2.

NOTE: Photocopy this page before completing

more than 26 wastes to list.

Form Approved OMB No. 158-S20004

EPA I.D. NUMBER (enter from page 1)												FOR OFFICIAL USE ONLY													
W 0 H D 0 0 4 1 6 6 3 3 6 3 1												W DUP 2 2 DUP													
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																									
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES																					
				1. PROCESS CODES (enter)								2. PROCESS DESCRIPTION (if a code is not entered in D(1))													
1	D 0 0 0	750,000 000	P	S 0 1																					
2	D 0 0 7																								INCLUDED IN ABOVE
3																									
4																									
5																									
6																									
7																									
8																									
9																									
10																									
11																									
12																									
13																									
14																									
15																									
16																									
17																									
18																									
19																									
20																									
21																									
22																									
23																									
24																									
25																									
26																									

V. DESCRIPTION OF HAZARDOUS WASTE

E. USE THIS SPACE TO LIST ADDITIONAL

PROCESS CODES FROM ITEM D(1) ON PAGE 1.

(continued)

EPA I.D. NO. (enter from page 1)														
0	4	D	0	0	4	1	6	6	3	3	6	T/A/C	3	6

VI. FACILITY DRAWING

An existing facility must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VII. PHOTOGRAPHS

An existing facility must include photographs (aerial or ground—its all) that clearly identify the facility's structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VIII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)

LONGITUDE (degrees, minutes, & seconds)

3	1	2	7	3	0	0
01	02	03	04	05	06	07

7	4	1	2	3	5	0	0
72	73	74	75	76	77	78	79

VIII. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER				2. PHONE NO. (area code & no.)			
3. STREET OR P.O. BOX		4. CITY OR TOWN		5. ST.		6. ZIP CODE	

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
J. H. Neale	<i>J. H. Neale</i>	11/7/80

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
J. J. Scazzaro	<i>James J. Scazzaro</i>	10/27/80

00 YAH06A

DEFICIENCY NOTIFICATION TABLE
ISS INSPECTION

FACILITY NO. - 81-HW-0480

OWNER - UNION CAMP CORPORATION

FACILITY NAME - UNION CAMP CORPORATION

FACILITY LOCATION - 6225 CAMP INDUSTRIAL ROAD, SOLON, O.

FACILITY CONTACT - JAMES SCAZZARD - GENERAL

PHONE NO. 216

ISS INSPECTION DATE - 8-21-81

MANAGER

248-0125

Page	COLUMN I Item No.	COLUMN II OAC Reference	COLUMN III USEPA Reference	COLUMN IV See Code Following	COLUMN V Refer To ISS Remark	COLUMN VI OEPA Use
3	III A 1	3745-55-12(A)	265.12 (A)			
	2					
	B 1	3745-55-13	265.13	B	✓	
	2	3745-55-13	265.13	B	✓	
	3	"	"	B	✓	
	C 1	3745-55-14	265.14			
	2	"	"			
	3	"	"			
	4	"	"			
	D 1	3745-55-15	265.15			
	2	"	"			
	3	"	"			
4	4	"	"			
	5	"	"			
	6	"	"			
	7	"	"			
	8	"	"			
	E 1	3745-55-16	265.16			
	2	"	"			
	3	"	"			
	4	"	"			
	5	"	"			
	6	"	"			
	F 1	3745-55-17	265.17			
	2	"	"			
	3	"	"			
5	IV A 1	3745-55-31	265.31			
	B 1	3745-55-32	265.32			
	2	"	"			
	3	"	"			
	C 1	3745-55-33	265.33			
	2	"	"			
	D 1	3745-55-34	265.34			
6	E	3795-55-35	265.35			
	V A 1	3745-55-52	265.52	B	✓	

Page	Item No.	OAC Reference	USEPA Reference	See Code Following	Refer To ISS Remark	DEPA Use
	A 2	3745-55-52	265.52	B	✓	
	3	"	"	B	✓	
	4	"	"	B	✓	
	5	"	"	B	✓	
7	B 1	3745-55-53	265.53	B	✓	
	C 1	3745-55-55	265.55	B	✓	
	2	"	"	B	✓	
	3	"	"	B	✓	
	D 1	3745-55-56	265.56			
VI	A 1	3745-55-71	265.71	B	✓	
	2	"	"			
	B 1	3745-55-72	265.72	B	✓	
8	C 1	3745-55-73	265.73			
	2b	"	"			
	c	"	"			
	d	"	"			
	e	"	"		✓	
	f	"	"			
	g	"	"			
9	VII A 1	3745-56-03	265.112			
	2	"	"			
	3	"	"			
	4	3745-56-32	265.142			
	B 1	3745-56-09	265.118			
	VIII I 1	3745-56-51	265.171			
	2	3745-56-52	265.172			
	3	3745-56-53	265.173			
	4	"	"			
	5	3745-56-54	265.174			
	6	3745-56-56	265.176			
10	7	3745-56-57	265.177			
	8	"	"			
	J 1	3745-56-72	265-192			
	2	"	"			
	3	"	"			
	4	3745-56-73	265-193			
	5	3745-56-74	265.194			
	6	3745-56-78	265.198			
	7	3745-56-79	265.199			
II	8	3745-56-78	265.198			
	K 1	3745-57-03	265.222			
	2	3745-57-04	265.223			
	3	3745-57-06	265.225			
	4	3745-57-07	265.226			
	5	"	"			
	6	3745-57-10	265.229			
	7	3745-57-11	265.230			

Page	Item No.	OAC Reference	USEPA Reference	See Code Following	Refer To ISS Remark	OEPA Use
12	L	1	3745-57-31	265.251		
		2	3745-57-32	265.252		
		3		265.258		
		4	3745-57-36	265.256		
		5	"	"		
		6	3745-57-37	265.257		
13	M	7	3745-57-37	265.257		
		1	3745-57-52	265.272		
		2	"	"		
		3	3745-57-53	265.273		
		4	3745-57-56	265.276		
		5	3745-57-58	265.278		
		6	3745-57-58	265.278		
		7	3745-57-59	265.279		
		8	3745-57-61	265.281		
14	N	A	1	3745-57-72	265.302	
			2	"	"	
			3	"	"	
			4	"	"	
		B	1	3745-57-79	265.309	
			2	"	"	
		C	1	3745-56-03	265.112	
			2	"	"	
			3	"	"	
			4	3745-56-32	265.192	
		D	1	3745-57-82	265.312	
				3745-55-17	265.17(b)	
		E	1	3745-57-83	265.313	
			2	3745-55-17	265.17(b)	
15		F	1	3745-57-84	265.314	
			2	"	"	
			3	"	"	
			4	"	"	
		G	1	3745-57-85	265.315	
		O&P				
16	I	B	1	3745-58-33	265.373	
			2	"	"	
			3	"	"	
			4	"	"	
			5	"	"	
	II	A	1a	3745-58-35	265.375	
			b	"	"	
			c	"	"	
17			2a	3745-58-35	265.375	
			b	"	"	
			B	1	"	
			2	"	"	
			3	"	"	
			4	"	"	
			5	"	"	

Page	Item No.	OAC Reference	USEPA Reference	See Code Following	Refer To ISS Remark	OEP Use
	III A 1	3745-58-37	265.377			
	B 1	"	"			
	C 1	"	"			
	D 1	"	"			
	E 1	"	"			
	F 1	"	"			
	G 1	"	"			
18	IV A 1	3745-58-42	265.382			
	2	"	"			
	Q 1	3745-58-51	265.401			
	2	"	"			
19	3	3745-58-52	265.402			
	4	3745-58-53	265.403			
	5	3745-58-55	265.405			
	6	3745-58-56	265.406			
	IX I (A)	3745-52-40	262.40	B	✓	
	(B) 1	3745-52-21	262.21	B	✓	
	2	"	"	B	✓	
20	3	"	"	B	✓	
	4	"	"	B	✓	
	5	"	"	B	✓	
	6	"	"	B	✓	
	7	"	"	B	✓	
	(C) 8	3745-52-42	262.42	B	✓	
	2 (A)	3745-52-30	262.30	B	✓	
	(B)	3745-52-31	262.31	B	✓	
	(C)	3745-52-33	262.33	B	✓	
21	3 1	3745-52-34	262.34			
	2	"	"			
	3	3745-56-54	265.174			
	4a	3745-56-72	265.192			
	b	"	"			
	c	"	"			
	d	3745-56-74	265.184			
	e	3745-56-78	265.198			
	f	3745-56-79	265.199			
22	VI A	3745-52-40	262.40	B	✓	
	B	3745-52-41	262.41	B	✓	
	VII 1a	3745-52-50	262.50			
	b	"	"			
	c	"	"			
	2	"	"			
23 X	I	3745-53-22	263.22			
	II A	3745-53-20	263.20			
	B	"	"			
	V A	3745-53-10	263.10			
	B	3745-53-10	"			

KEY TO CODED ITEMS (COLUMN .V)

- A. Because the inspection at this facility was conducted prior to May 19, 1981, requirements which became effective on that date were not checked. These requirements are now effective and must be met as a condition of interim status under the federal regulations and as part of the considerations for issuance of an Ohio Hazardous Waste Permit.
- B. or C. The inspection revealed a deficiency in compliance with this item, which must be satisfactorily corrected. A determination of compliance will be made in the future.
- D. The inspection revealed a violation of regulations pertaining to this item. Since the environmental consequences of this violation may be quite serious this problem must be corrected as soon as possible. We will schedule another inspection no sooner than 20 days after the date of this letter to determine if compliance has been achieved. Further steps in the permitting process will be delayed until the re-inspection.
- E. Regulations concerning this item will become effective November 19, 1981. These requirements were not addressed in the inspection, but compliance is required by November 19, in order to meet federal interim status requirements and as a part of the considerations in issuing an Ohio Hazardous Waste Permit.
- F. Inspection revealed non compliance with this item. Compliance with this item is required unless a facility has filed as a storage facility. You should either correct the deficiency listed or file an amended Part A application for a storage facility.
- G. NFPA's code requires that the tanks be located 50 feet from the property line.

**D. Corrective
Action**



RECEIVED APR 08 1993
WMD RCRA
RECORD CENTER *Cmp*

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5
230 SOUTH DEARBORN ST.
CHICAGO, ILLINOIS 60604

REPLY TO THE ATTENTION OF:

5HR-12

June 28, 1991

Mr. Mike McDonald
Union Camp
6225 Camp Industrial Road
Solon, OH 44139

Re: Visual Site Inspection
Union Camp OHD 004166336

Dear Mr. McDonald:

The United States Environmental Protection Agency (U.S. EPA) Region V will conduct a Preliminary Assessment and Visual Site Inspection (PA/VSI) at the referenced facility. This inspection is conducted pursuant to the Resource Conservation and Recovery Act, as amended (RCRA) and the Comprehensive Environmental Response, Compensation, and Liability Act, as amended (CERCLA). The PA/VSI requires identification and systematic review of all solid waste streams at the facility. The objective of the PA/VSI is to determine whether or not releases of hazardous wastes or hazardous constituents have occurred or are occurring at the facility which may require further investigation. This analysis will also provide information to establish priorities for addressing any confirmed releases.

The visual site inspection of your facility is to verify the location of all solid waste management units (SWMUs) and areas of concern to make a cursory determination of their condition by visual observation. The VSI supplements and updates data gathered during a preliminary file review. During this site inspection, no samples will be taken. A sampling visit to ascertain if releases of hazardous waste or constituents have occurred may be required at a later date.

Assistance of some of your personnel may be required in reviewing solid waste flow(s) or previous disposal practices. The site inspection is to provide a technical understanding of the present and past waste flows and handling, treatment, storage, and disposal practices. Photographs of the facility are necessary to document the condition of the units at the facility and the waste management practices used.

The VSI has been scheduled for July 10, 1991. The inspection team will consist of Paul Wooldridge and one other employee of PRC Environmental Management, Inc., contractors for the U.S. EPA. Representatives of the Ohio Environmental Protection Agency may also be present. Your cooperation in admitting and assisting them while on site is appreciated.

Mr. Mike McDonald

Page 2

The U.S. EPA recommends that personnel who are familiar with present and past manufacturing and waste management activities be available during the VSI. Access to any relevant maps, diagrams, hydrogeologic reports, environmental assessment reports, sampling data sheets, environmental permits (air, NPDES), manifests, or correspondence is also necessary, as such information is needed to complete the PA/VSI.

If you have any questions, please contact me at (312) 886-4448 or Sheri Bianchin at (312) 886-4446. A copy of the Preliminary Assessment/Visual Site Inspection Report, excluding the conclusions portion may be made available upon request.

Sincerely yours,



Kevin M. Pierard, Chief
OH/MN Technical Enforcement Section

cc: Dave Wertz, Ohio EPA - Northeast District
David Sholtis, Ohio EPA - Columbus
Edward Kitchen, Ohio EPA - Columbus

CERTIFICATION REGARDING POTENTIAL RELEASES FROM
SOLID WASTE MANAGEMENT UNITS

FACILITY NAME: Union Camp Corporation
EPA I.D. NUMBER: OH0004166336
LOCATION CITY: Solon
STATE: Ohio

1. Are there any of the following solid waste management units (existing or closed) at your facility? NOTE - DO NOT INCLUDE HAZARDOUS WASTE UNITS CURRENTLY SHOWN IN YOUR PART A APPLICATION

	YES	NO
• Landfill	<u> </u>	<u> X </u>
• Surface Impoundment	<u> </u>	<u> X </u>
• Land Farm	<u> </u>	<u> X </u>
• Waste Pile	<u> </u>	<u> X </u>
• Incinerator	<u> </u>	<u> X </u>
• Storage Tank (Above Ground)	<u> </u>	<u> X </u>
• Storage Tank (Underground)	<u> </u>	<u> X </u>
• Container Storage Area	<u> X </u>	<u> </u>
• Injection Wells	<u> </u>	<u> X </u>
• Wastewater Treatment Units	<u> </u>	<u> X </u>
• Transfer Stations	<u> </u>	<u> X </u>
• Waste Recycling Operations	<u> </u>	<u> X </u>
• Waste Treatment, Detoxification	<u> </u>	<u> X </u>
• Other <u> </u>	<u> </u>	<u> X </u>

See Attached
Letter

2. If there are "Yes" answers to any of the items in Number 1 above, please provide a description of the wastes that were stored, treated or disposed of in each unit. In particular, please focus on whether or not the wastes would be considered as hazardous wastes or hazardous constituents under RCRA. Also include any available data on quantities or volume of wastes disposed of and the dates of disposal. Please also provide a description of each unit and include capacity, dimensions and location at facility. Provide a site plan if available.

Flexographic ink washwater and sludge-analysis attached. 15 drums

of ink washwater disposed of July 9, 1982; drum storage - 75' x 75' -
site plan attached

NOTE: Hazardous wastes are those identified in 40 CFR 261. Hazardous constituents are those listed in Appendix VIII of 40 CFR Part 261.

3. For the units noted in Number 1 above and also those hazardous waste units in your Part A application, please describe for each unit any data available on any prior or current releases of hazardous wastes or constituents to the environment that may have occurred in the past or may still be occurring.

Please provide the following information

- a. Date of release
- b. Type of waste released
- c. Quantity or volume of waste released
- d. Describe nature of release (i.e., spill, overflow, ruptured pipe or tank, etc.)

No release ever occurred from this site.

4. In regard to the prior or continuing releases described in Number 3 above, please provide (for each unit) any analytical data that may be available which would describe the nature and extent of environmental contamination that exists as a result of such releases. Please focus on concentrations of hazardous wastes or constituents present in contaminated soil or groundwater

N/A

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the submittal is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. (42 U.S.C. 6902 et seq. and 40 CFR 270.11(d))

F. A. Manfredonia - Manufacturing Manager

Typed Name and Title

F. A. Manfredonia
Signature

2-27-86

Date

7/20/89

①

arrived @ 9:AM overcast
70°F

met 120 conference Room

Union Camp purchase 1970

since a tall oil processor
wanted to up grade

into burn up fuel
core of facility was fatty acid

UCC added dinner equip

cook up to 500

separate mixer

from dinner acids

for export + domestic

consumption

up grade is to polyamide resins
end up in adhesive ink in

curry agents some epoxy paints

some resins mixed with solvents

(prod mks) use solvent-toluene

try to utilize all by products - (2)

tall oil from sawdust
cascar oil from brazil oil
Palm oil from Malaysia
tallow from rendering plants
sep not correct. hydrogenation

Tall oil byproduct of paper mill
Limonene acids C18 fatty acids
fatty acid separated from process
sludges on dec
wet 15% water

steam the press to get oil
like press

more acids as sat acids goes back
to solvent process.

150 acids are sol in acids

rubber grade

bar as patch (steel)

Sometimes make or by dimer

(3)
glycols + butther glycol edipic acids
for esterification process.

Air PC equip
caustic fusion lines

Star valve goes to process

outfall 004 sealed off SS-317

have 5-6 wells for process
city paid water
wells for process

Per-contact water 8 mil/day

1/2 water direct contact

the neutral does not imply autoxidation

toluene is dissolved into ink resins
goes out to product.
recycle for clean.

(4)

mid 1920 smoke stack
 previous battery case 1930 for
 Ford. batallion cases
 vacant for 5-7 yrs 1932
 W.C. Holmby - fatty acids
 used tallo products
 @ 1950 Wallace + Turnship
 merge w/ persault → persault
 late 1960s
 then Union Camp
 fatty 30's
 ester started in 40's
 down mid 70's
 present - River
 East 1962 and other
 two alcohol tanks
 x will try to get well logs
 intermediate source priority pollution
 for river seepage
 BOD + COD
 from leakers in industrial sewer
 rebuilt drainage system
 collect water in camp
 River bank soil returned and sampled
 1. heavy petroleum
 2. oil as landfill '98
 OEPA said okay to landfill
 but landfill wants to see doc.

(5)

W. + pallid
 to collect as much as possible due to
 value.
 1973 may have been or defile
 up stream 2 steel mills + power
 plant. according to facility not then
 no fires or activity
 2130 started tow
 use 4 hrs / yr
 is ship/receive mostly raw/mot
 of a few bag Rail
 water again to fast + east down
 the winged generate burn to
 make air eld
 absorb water
 nitrogen and +
 black tanks
 fatty acid or water
 photo roll 1

⑥

Q1 P1 sump

fatty acid collector sump
vacuum off gate removed

⑦

Fatty Acid Pool

⑧

view of nickel Reclaiming

⑨

view deaerating / hydro sump
fatty acids

there is clear air feed tanks

⑩

200 tank methanol, no flow
this dustier @ 30 ft m-h
has high surges
use low flow no heat transfer
water is vaporized
all reclaimed
process moved by control panel

off spec recycled drums
methanol is lost w/ hydrogenerator

After hydrogenerator filter at reclaim
nickel

Surge goes to collector

most product is fed to tank 12000 gal

hydrogenerator 500 psi
@ 4500 F

vacuum system to aid
dearment fatty acid sump
offline

P-5

unloads air

6

fill oil Rail car unloading
stand

7

earth tank diked

8

dumpster

9

Dimer Sump (Summa 10)

8

9

hydrogen dimer in leaky dimer

unloads BKS of tall oil

Dimer goes to dimer wash tank

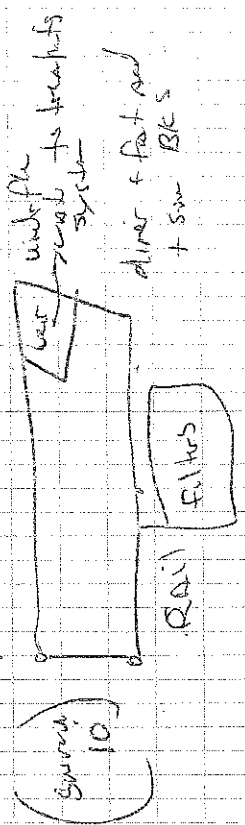
Ammonia scrubber used in emergency

Red lead detector

All dimer goes to neutral wash tank
cool water for heat exchanger

BKS react after sent to intermediate
slurry scrubber with scrubber

pump goes back to process



⑩

view of Diner hop wheel

(sum 33)

Return trench

⑪

2
of
safety
box

(sum 1)

(AOC F)

(sum 8)

⑪

Diner Clay Hopper waste hopper

unload Area

76 daily proceeds

wash the yeast cups

414 +

sum 12

trench is palletize trench

make pellets by water, exclude cat waste, allow

trench is inside bldg

(3:15)

yellow line demarked (sum 1)

next to (AOC F)

salvage + per harvesting
waste 65X
Oxidized
planning

16 blowing down 12

17 solvent Barn
18 "

19 Ready

21 Snap pile

22 Haz. Storage Barn

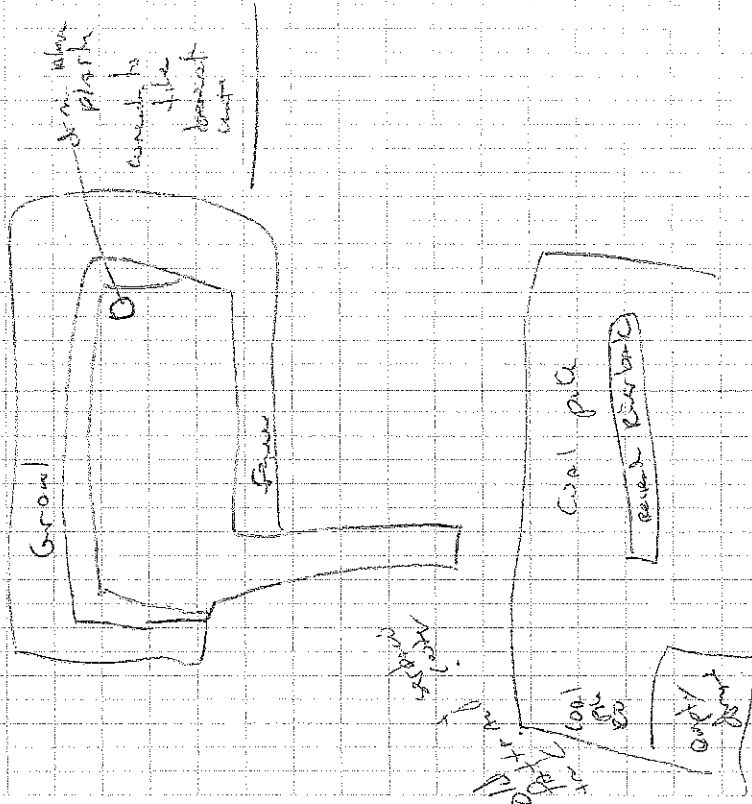
23 Swamp

25 Overview

26 Boxyard

13 stay down this depth or below

Solvent Storage Barn Area



(14)

27) River bed photo

28) drums

29) snake look west

30) view of pond NW

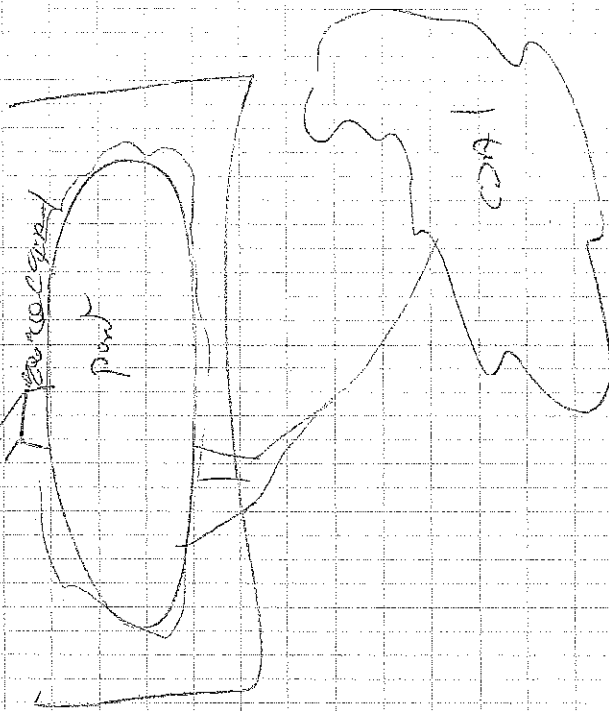
31) (sun 26)

32) fall 132
33) to ditch

River

(15)

use soda ash so also give
to River etc. water



Down Bumping and

(sun 26)

stay and for
to every, every

to
to
to

16

(2) (34) (sum 11)

(2) Tank 752

(20) (25) sum for #2 distill gear

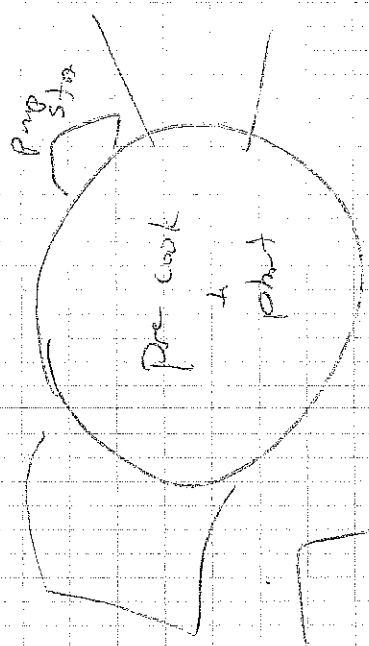
Roll 1
(3) (37) (sum 33 + 34)
cool wash
unboiled
oil

Roll 2
(3) (1) (sum 33 + 34)
(2) Dye + collector
(sum 34)

(3) Dye + collector +
pneumatic tube

(4) bag of (sum 33)

17



(2)

(5)

sing for folks who are

(13)

(2)

(6)

ship show people Paul
Died of 1913
and car

(20)

(20)

(7)

random all rights
from now on
original ref

(3)

(3)

(8)

broken seen for
(see L)

(3)

1941

(10)

ourselves of them and with it

(2)

(10)

Some Dec D + H

(19)

(2)

(11)

(Summ 24)

bagged

(20)

penner
Astoria

(26)

down the

cars rubble

(3)

(12)

to the basin

(5)

(13)

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

(14)

(3)

(15)

Weeks 500 (200-)

(16)

find pass for water

(17)

4 20

Serbian ph and

(20)

sebas and

good build, blades

21

18 Thermal no leak Area
(ACC.O)

(2)

19 Dumps for coke filler
gas + landfill

(20)

20 not connected to above ground

(21)

23 (Doc P)

(3)

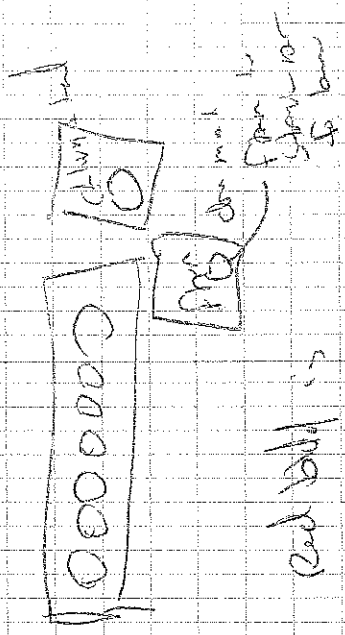
24 Primary clarifier

(3)

25 Associated w/ paper
pulp mill

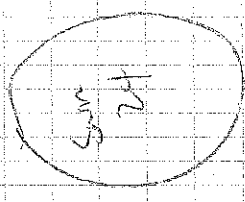
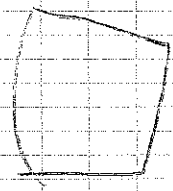
22

Roller Area mat

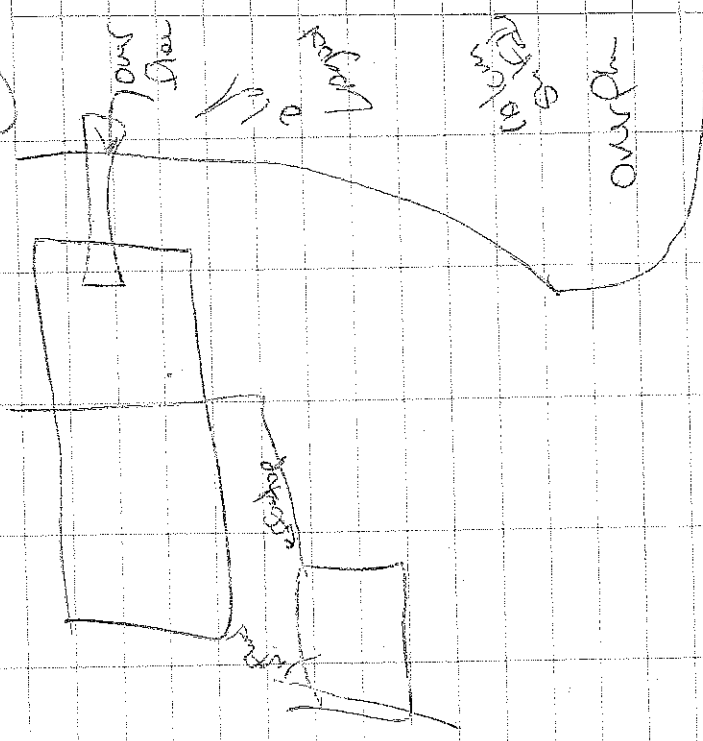


Roller Area mat
Paper to be burned

5125 WWTP

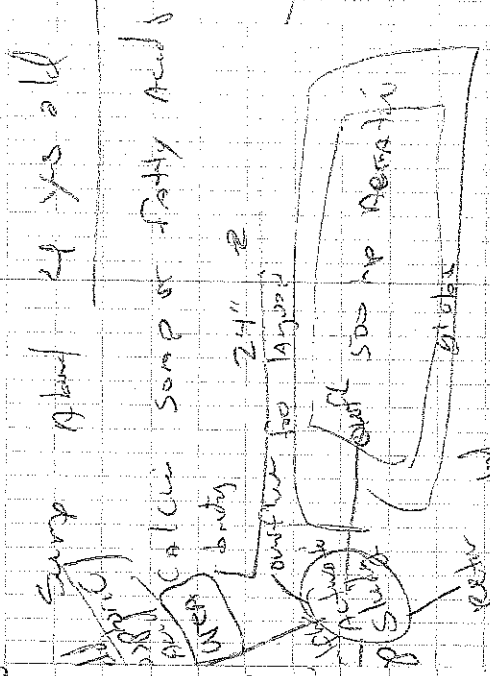


(23)



(2) (2) (20) (20) (3) (3) (3)

(25)



(24)

(Summit) Old water line

Alaska Landfill B

Sludge withdrawn papers
dropping used by
Le sume Hist of
Bent

Surge for Ruff
125 UIC
US
Pria
Clarifier

Sludge Roll off heaped

Sludge in leak
for water
no show
(sum 25)

(Sum 25)

Surge & Clearwell

(28)

(29)

(30)

(31)

(32)

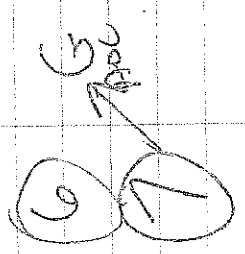
(33)

(34)

(1)
(2)

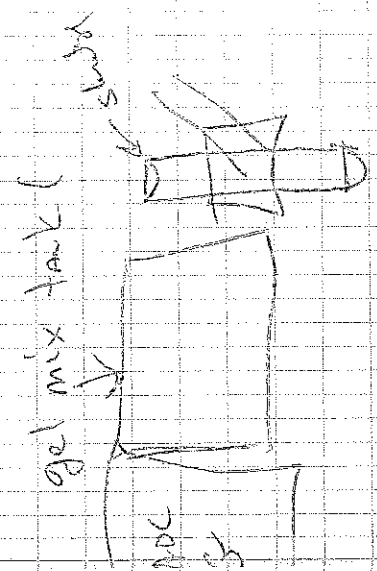
(26)

- (3) clear well
- (4) pump
- (5) polymer gel mix tank



(27)

basin pumps + clarifier
activated sludge unit
2 weeks old



Clarifier + clarifier
cake + dewater

(2) (2) (20) (20) (3) (3) (21)

6 PM

debriefing

Re 13

(11)

Abnormal Live Nontreat -

(28)

CA 11 Abnormal
AOC M + N

Left UNC

@ 6:45

✓

(29)